

# West Torrance Robotics

## 2017-2018 Member Forms

Thank you for your interest in joining West Torrance Robotics, FTC Team #4512 and FRC Team #5124! We are looking forward to having a great year of robots

Please complete and turn in the Required Forms no later than Friday, October 16th. We want to make sure that all of our members are safe within our Robotics Room and Woodshop. Also, it is absolutely necessary that both members and parents receive our emails. They contain important information about competitions, fundraising opportunities, and outreach events.

Optionally, there are volunteer forms for adults who are interested in helping our team as a mentor or in administration. Please turn the forms in ASAP. Dues: \$100 (payable to West Torrance Robotics - turn in to ASB).

### **Required Forms**

- Contact Information - Pg. 2
- Code of Conduct - Pg. 3
- Youth Medical Release, Release of Liability, and Permission Form - Pg. 4-5
- Member Information Form - Pg. 6

### **Optional Forms**

- New Volunteer Application - Pg. 7
- Volunteer Areas of Interest - Pg. 8

### **Read Over This:**

- FIRST Notification of Parent/Guardian Guidelines - Pg. 9

If you have any questions, feel free to contact [wtrobotics@gmail.com](mailto:wtrobotics@gmail.com).

Thank you for your support,  
JaeWon Hwang, President

# Contact Information

Expect to receive an email newsletter from us regularly. We have a Facebook group for members to share news and to hype about next year's game (recommended to join). To contact West Torrance Robotics, email [wtrobotics@gmail.com](mailto:wtrobotics@gmail.com) or [evans.chrsity@tusd.org](mailto:evans.chrsity@tusd.org).

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## Student

Name:

Facebook Name (optional):

Grade:

T-Shirt Size:

Home Address:

Preferred Phone:

Home or Cell?

Back-up Phone:

Home or Cell?

Email Address:

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## Parent/Guardian #1

Name:

Home Address (if different):

Preferred Phone:

Home, Cell, or Work?

Back-up Phone:

Home, Cell, or Work?

Email Address:

Employer:

Occupation:

Does your employer have a matching gift or corporate sponsorship program?

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## Parent/Guardian #2

Name:

Home Address (if different):

Preferred Phone:

Home, Cell, or Work?

Back-up Phone:

Home, Cell, or Work?

Email Address:

Employer:

Occupation:

Does your employer have a matching gift or corporate sponsorship program?

# Code of Conduct

## Gracious Professionalism

Every member of West Torrance Robotics is expected to be an example of Gracious Professionalism both on and off the field. As stated on the FIRST website:

Dr. Woodie Flowers, FIRST National Advisor and Pappalardo Professor Emeritus of Mechanical Engineering, Massachusetts Institute of Technology, coined the term "Gracious Professionalism®." Gracious Professionalism is part of the ethos of FIRST. It's a way of doing things that encourages high-quality work, emphasizes the value of others, and respects individuals and the community.

With Gracious Professionalism, fierce competition and mutual gain are not separate notions. Gracious professionals learn and compete like crazy, but treat one another with respect and kindness in the process. They avoid treating anyone like losers. No chest thumping tough talk, but no sticky-sweet platitudes either. Knowledge, competition, and empathy are comfortably blended.

In the long run, Gracious Professionalism is part of pursuing a meaningful life. One can add to society and enjoy the satisfaction of knowing one has acted with integrity and sensitivity.

**I have read the above description and understand Gracious Professionalism.**

**I promise to act with Gracious Professionalism at all times, on and off the field.**

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Safety Rules - Mrs. Evans' "The Deadly Dozen"

These rules were made for woodshop, but will still be in effect in the Robotics Room.

1. SAFETY GLASSES
2. CLEAR WORK AREA
3. STOCK MUST MEET MINIMUM SIZE
4. EXAMINE STOCK FOR DEFECTS
5. REMOVE JEWELRY & SECURE CLOTHING
6. TURN ON VENTILATION
7. CHECK HEIGHT/ANGLE OF BLADE & POSITION OF GUARD
8. LOCATE PUSH STICK
9. PLAN & MARK WHERE STOCK IS TO BE CUT
10. PLAN & ADJUST FENCE, INFEED TABLE, OR MITER GAUGE
11. DO NOT ALLOW STOCK TO CONTACT BLADE UNTIL MACHINE REACHES FULL SPEED
12. SHOW RESPECT FOR EACH OTHER (NO THEFT OR HORSEPLAY)

**I have read the above rules and understand "The Deadly Dozen."**

**I promise to uphold the safety rules at all times.**

Member Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Youth Medical Release, Release of Liability, and Permission Form

Name of Student \_\_\_\_\_

Age \_\_\_\_\_

Grade \_\_\_\_\_

Date of Birth \_\_\_\_\_

I am the parent/guardian of the above student, and I give permission for the minor to take part in the Robotics Team 4512 / 5124 [West Torrance Robotics] and any of its special events during from September 7, 2017 to June 30th, 2018.

(I)(We), the undersigned, parent(s) of the above named child, a minor, do hereby authorize the Mentors, Chaperones, and volunteers of WEST TORRANCE ROBOTICS as agent(s) for the undersigned to consent to any x-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is to be rendered under the general or special supervision of any physician and surgeon licensed under the provisions of the Medical Practice Act, whether such diagnosis or treatment is rendered at the office of said physician or at a hospital.

It is understood that this authorization is given in advance of any specific diagnosis, treatment, or hospital care being required but is given to provide authority and power on the part of our aforesaid agent(s) to give specific consent to any and all such diagnosis, treatment, or hospital care which the aforementioned physician in the exercise of his best judgment may deem advisable.

IN CONSIDERATION of allowing the below MINOR participant to compete, officiate, observe, work for, or participate in any way in the team Events and Activities ("Activities") and/or being permitted to enter for any purpose any WEST TORRANCE ROBOTICS AREA (defined as any area, including but not limited to competition areas, parent vehicles, hotels for travel, and any pit or autoshop area), EACH OF THE UNDERSIGNED, for himself/herself, his/her personal representatives, heirs and next of kin agrees:

THE MINOR AND PARENT OR GUARDIAN HEREBY ASSUME FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE due to negligence of Releasees (as identified below) or otherwise, while in or upon the WEST TORRANCE ROBOTICS AREA for any purpose including competing, officiating, observing, working or participating in the Activities. The undersigned recognize and understand that there are risks and dangers associated with participation in the Activities and admission within the WEST TORRANCE ROBOTICS AREA that could cause severe bodily injury, disability and death. Further, the risks and dangers may be caused by the negligent failure to act of the Releasees and others. All of the risks and dangers associated with participating in the Activities and entry into the WEST TORRANCE ROBOTICS AREA are assumed notwithstanding.

THE MINOR AND PARENT OR GUARDIAN release, waive, discharge and covenant not to sue the promoters, participants, associations, sanctioning organizations, (or any affiliates thereof), all persons in the WEST TORRANCE ROBOTICS AREA, sponsors, advertisers, owners, lessees and lessors of the premises, used to conduct the Activities and their officers, agents, and employees (all for the purpose herein referred to as ("Releasees"), from all liability to ourselves, the undersigned's, our personal

representatives, assigns, executors, heirs, and next of kin for any and all claims, demands, losses or damages of the MINOR and/or parent or guardian on account of any injury, including, but not limited to the death or injury of the parent/guardian or MINOR or damage to property, all of which is caused or alleged to be caused in whole or in part by the negligence of the Releasees or otherwise.

THE PARENT AND/OR GUARDIAN hereby agrees to indemnify and save and hold harmless, the Releasees and each of them from any loss, liability, damage or cost that may occur due in any manner or degree to the presence of the parent/guardian or the MINOR in the WEST TORRANCE ROBOTICS AREA, or in any way while participating in the Activities and whether caused by negligence of the Releasees or otherwise. The parent and/or guardian further recognize and agree they are executing this Waiver and Release of Liability and Indemnity Agreement on behalf of themselves and on behalf of the MINOR.

THE PARENT HEREBY agrees that this Release and Waiver of Liability, Assumption of Risk and Indemnity Agreement extends to all acts of negligence by the Releasees, INCLUDING NEGLIGENT RESCUE OPERATIONS and is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE PARENT OR GUARDIAN HAS READ AND VOLUNTARILY SIGNS THE WAIVER AND RELEASE OF LIABILITY AND INDEMNITY AGREEMENT AND DOES SO VOLUNTARILY AND WITH THE UNDERSTANDING THAT SUBSTANTIAL RIGHTS ARE BEING GIVEN UP.

This authorization is given pursuant to the provisions of Section 25.8 of the Civil Code of California. This authorization shall remain effective through June 30th, 2018 unless sooner revoked in writing delivered to said agent(s).

Father's Signature \_\_\_\_\_ Date \_\_\_\_\_

Mother's Signature \_\_\_\_\_ Date \_\_\_\_\_

If Applicable:  I represent that I have sole legal custody or am the sole parent/guardian.

Home Address \_\_\_\_\_ Phone Number \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Employment \_\_\_\_\_

Employment Address \_\_\_\_\_ Phone \_\_\_\_\_

Doctor \_\_\_\_\_ Phone \_\_\_\_\_

Insurance Company \_\_\_\_\_ Policy/ID number \_\_\_\_\_

Allergies or Medical Conditions of Minor  
\_\_\_\_\_

**EMERGENCY CONTACT MUST BE SOMEONE OTHER THAN PARENT(S) / GUARDIANS**

Emergency Contact Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

NOTIFY WEST TORRANCE ROBOTICS IMMEDIATELY OF ANY CHANGES IN ANY OF THE ABOVE INFORMATION

# Member Information Form

Please fill out completely and honestly. This will help us give you work that you are interested, make a schedule that fits the members' schedules, and see what our members are interested in.

Name: \_\_\_\_\_

**I am interested in helping in technical areas (Check all that apply):**

- Mechanical Engineering
- Electrical Engineering
- Programming
- Welding
- CAD
- Machining
- Graphic Design
- Web Design
- Other:

**I am interested in helping in non-technical areas (Check all that apply):**

- Scouting/Strategy
- Public Relations
- Community Outreach
- Public Speaking
- Professionalism
- Finance
- Fundraising
- Cooking
- Sewing
- Organization
- Other

Do you have any skills that might be of use to the team? Explain.

What extracurricular activities do you participate in besides Robotics?

# New Volunteer Application

If you are interested in mentoring or volunteering at West Torrance Robotics (adults only)...

Name: \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

How long have you lived at this address? \_\_\_\_\_

If less than 5 years, provide previous address:

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Why do you want to work with a FIRST Team?

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Have you worked with children in the age range of this team before? Yes / No

Have you ever been excluded from working with children by any organization? Yes / No

Have you ever been arrested for other than a traffic violation? If yes, provide details and dates.

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Signature: \_\_\_\_\_

Date: \_\_\_\_\_

# Volunteer Areas of Interest

Name:

Email:

Fill out the information as you'd like. We will contact you to see how you can help.

**I am interested in helping in technical areas (Circle all that apply):**

- Mechanical Engineering
- Electrical Engineering
- Programming
- Welding
- CAD
- Machining
- Graphic Design
- Web Design
- Other:

**I am interested in helping in non-technical areas (Circle all that apply):**

- Scouting/Strategy
- Public Relations
- Community Outreach
- Public Speaking
- Professionalism
- Finance
- Fundraising
- Cooking
- Sewing
- Organization
- Other:

**I am interested in driving members to team events and competitions:**

- Passengers can take:
- I am interested in supervising members at events and competitions:

**I am interested in supervising meetings on school days (Circle all that apply):**

- Days Available: M T W Th F
- Times Available: 3pm-6pm, 6pm-9pm

**I am interested in supervising meetings on weekends:**

- Days Available (Circle all that apply): Sat Sun
- Times Available:



# FIRST Notification of Parent/ Guardian Guidelines

Greetings,

We are confirming that your child is now a member of FIRST FTC Team #4512 and FRC Team #5124 West Torrance Robotics hosted by West High School the Team will be meeting at the wood shop (room 6104), drafting room (room 5105), and the Robotics room (room 6101).

Our Team will hold a Safety Meeting that will include an age-appropriate training film about avoiding safety risks including child abuse and molestation; you are welcome to view the video in advance by contacting one of us and you are encouraged to attend the Safety Meeting — we will notify you of the date and time.

Our Team may work with student mentors who are older than your child; we will provide you with specific information about the role of these student-mentors and our oversight of their involvement upon request.

You understand that you, as the Team member's parent/guardian, are fully responsible for arranging transportation, and supervising the manner in which your child travels, to and from places where the Team meets, and for informing one of us as the Team Lead Coach/Mentor of any restrictions you wish to place on your child's access to, or dismissal from, the Team meeting place. We will try to accommodate any restrictions you may require and will inform you if we are unable to do so.

As part of its FIRST Youth Protection Program, FIRST strongly encourages all parents/guardians of Team members to: be aware of how FIRST programs are conducted; participate in Team activities; and, read FIRST Guidelines for Parents.

For more information on the FIRST Youth Protection Program, visit <http://www.usfirst.org/aboutus/youth-protection-program>.

Please contact us at [wtrobotics@gmail.com](mailto:wtrobotics@gmail.com) for more information about our Team's activities.

Sincerely yours,

JaeWon Hwang, President

Christy Evans, Teacher Advisor