

Sussex County Science Fair

Registration Form 2026

Last Name	First Name		M / I
Home Address:			
City	State	Zip	Phone
Grade: Age: If Team, (HS Only) Partner_			-
Student /parent e-mail			
School:			
School Address:			
City	State	ZIP	
School Phone:	School Fax		
Adult Sponosr/Teacher:			
Adult Sponsor/Teacher e-m	ail		
This project has met ISEF ru	les for Safety and Pri	or Approva	al (sponsor init.)
Parent/Guardian Name(s)			
Parent / Guardian Cell Phon			
Project Title:			
Project Category (<u>select onl</u>	<i>y one</i> from below):		
	●Cate	nories	
Behavioral / Social Science	Biocher	nistry	Botany
Earth and Space Science	Chemis	,	Computer Science
Environmental Sciences	Engine	ering	Mathematics

Medicine and Health Zoology	Microbiology	Physics
Does your project display require electri May we take photos for publicity?	CITY?	