TEAM ENTRY FORM
GAWP 2024 STUDENT DESIGN COMPETITION

SUBMIT ENTRY FORM BY FEBRUARY 9, 2024 to slanier@gawp.org

Teams may consist of more than four members. However, a maximum of four team members shall be permitted to present at the GAWP SDC. One additional team member may be on the presentation platform but shall be dedicated solely to advancing the presentation slides. If desired, additional team members may participate in the question and answer portion of the presentation. GAWP can accept up to 8 members in a team, but encourages teams of 4 to 6 members. GAWP will sponsor up to $5,500 for travel expenses for the winning GA team (4 team members and its faculty advisor) to attend WEFTEC to participate in the WEF Student Design Competition.

Please note - Names provided below will be printed in competition promotional materials, and on participation Certificates, as shown. Please make sure all names are included and written correctly. Team members listed are final and may not be changed.

Project Title: __________________________________________________________________________
☐ Wastewater Design Competition ☐ Water Environment Competition

Name of University: _______________________________________________________________________
Address: _______________________________________________________________________________
City: ___________________________________________________________________________________
State: __________ Zip: __________

Faculty Advisor:
Full Name and Credentials (PE/PhD/etc.): ___________________________________________________
Phone: _______________________________________________________________________________
Email: ________________________________________

Team Leader / Responsible Contact Individual:
Name: _______________________________________________ Level in School: _______
Phone: _______________________________________________________________________________
Email: ________________________________________
GAWP Member Number: ____________________________________________

Name(s) of Additional Team Members: (use additional paper if necessary)
Name: _______________________________________________ Level in School: _______
Email: ________________________________________
GAWP Member Number: ____________________________________________

Name: _______________________________________________ Level in School: _______
Email: ________________________________________
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