

**Twenty-Sixth Annual Central Arkansas Regional Science Fair**  
**SENIOR DIVISION (9-12)**  
**University of Arkansas at Little Rock**  
**Saturday, February 28, 2009**

**Mail entries to:** Melissa Donham, Central High School, 1500 S. Park St., Little Rock, AR 72202

**Registration Fees:** \$15 Individual Projects, \$30 Team Projects

**Deadlines:** Postmarked by February 16, 2009 or Hand Delivered by February 24<sup>th</sup>, 2009

**Late Fees:** Entries received after February 24<sup>th</sup> must also include a late fee of \$10

Entries registered on site the day of the fair must include a late fee of \$20

**Note:** Each student member of a team must fill out a separate entry form and submit them jointly.

**Please type or print very clearly**

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

Student's email address \_\_\_\_\_

Grade \_\_\_\_\_ Gender (Male or Female) \_\_\_\_\_

Address \_\_\_\_\_ Home Phone Number (\_\_\_\_) \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

If a team project, list the other members of the team \_\_\_\_\_

Title of Project \_\_\_\_\_

**Category (Circle One)**

Animal Sciences	Chemistry	Medicine & Health
Behavioral & Social Science	Computer Science	Microbiology
Biochemistry	Earth and Planetary Science	Physics & Astronomy
Cellular and Molecular Biology	Engineering	Plant Sciences
	Environmental Science	Team Projects
	Mathematics	

Teacher/Adult Sponsor who will be attending the fair with you \_\_\_\_\_

School \_\_\_\_\_ School Phone (\_\_\_\_) \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_

School Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

School FAX Number (\_\_\_\_) \_\_\_\_\_ Teacher's email \_\_\_\_\_

Mail the following items:

- \_\_\_\_\_ 1. This registration form
- \_\_\_\_\_ 2. One copy of your abstract (typed, 1/2 page, single spaced)
- \_\_\_\_\_ 3. A COPY of your properly completed, signed, dated, and approved research plan (This includes form 1A, 1B, and the research plan attachment) Original forms must be displayed with the project
- \_\_\_\_\_ 4. A copy of the completed Checklist for Adult Sponsor/Safety Assessment Form
- \_\_\_\_\_ 5. Any additional required ISEF forms.
- \_\_\_\_\_ 6. A check for \$15.00 for individual projects, \$30 for team projects payable to:  
Central Arkansas Regional Science Fair Association (CARSF)

Email questions to [Melissa.Donham@lrsd.org](mailto:Melissa.Donham@lrsd.org) or call 501-447-1526