**Registration Form:**

Submissions are welcome from **individual participants** as well as from **teams of up to five** people. Team size is not relevant to the evaluation criteria. Participants must read and accept the conditions of participation. **Students and graduates** of universities and technical schools, from IT, business, engineering and all other disciplines are welcome to participate. A detailed technical knowledge of the construction industry is not necessarily required to participate.

Participating teams must register with every team member contact details, and le­cturer (if applicable) and **send your application** to [iot-competition@hilti.com](file:///C%3A/Users/leefenn/AppData/Local/Microsoft/Windows/Temporary%20Internet%20Files/Content.Outlook/KM4XQAXF/iot-competition%40hilti.com). Register early to be able to join our competition webinar on October!

**Important Dates:**

Registration Opens: August 22, 2016

Submission Deadline: December 31, 2016

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| **TEAM NAME:** Give us a team name so that we know how we can address you! |

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| **LECTURER INFORMATION** \*\* Please input your lecturer details (if applicable)  |
| **Full Name:** |  |
| **Contact Number:** |  |
| **E-Mail:** |  |
| **University:** |  |
| **Country:** |  |
| **Nationality:** |  |

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| **PARTICIPANT(S) INFORMATION**  |
|  | **PARTICIPANT 1** |
| **Full Name:** |  |
| **Contact Number:** |  |
| **E-Mail:** |  |
| **University:** |  |
| **Country:** |  |
| **Nationality:** |  |

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| --- | --- |
|  | **PARTICIPANT 2** |
| **Full Name:** |  |
| **Contact Number:** |  |
| **E-Mail:** |  |
| **University:** |  |
| **Country:** |  |
| **Nationality:** |  |

|  |  |
| --- | --- |
|  | **PARTICIPANT 3** |
| **Full Name:** |  |
| **Contact Number:** |  |
| **E-Mail:** |  |
| **University:** |  |
| **Country:** |  |
| **Nationality:** |  |

|  |  |
| --- | --- |
|  | **PARTICIPANT 4** |
| **Full Name:** |  |
| **Contact Number:** |  |
| **E-Mail:** |  |
| **University:** |  |
| **Country:** |  |
| **Nationality:** |  |

|  |  |
| --- | --- |
|  | **PARTICIPANT 5** |
| **Full Name:** |  |
| **Contact Number:** |  |
| **E-Mail:** |  |
| **University:** |  |
| **Country:** |  |
| **Nationality:** |  |

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