



STUDENT DISCLOSURE FORM

PLEASE MAKE 2 COPIES OF THIS FORM

1. **March 11th, 2009 Mailing Deadline:** Mail one copy, postmarked by March 11th, 2009 and include a \$10 check or money order made out to NFIPLA Foundation with the school name written on the check. One check can be written for all submissions from one school. Please mail to: **WNY Invention Convention, 625 Lafayette Avenue, Buffalo, NY 14222**
2. **March 27th, 2009: Attach one copy to the back of each invention** participating in the WNY Invention Convention. Deliver to the Buffalo Museum of Science, 1020 Humboldt Parkway, Buffalo, 14211, on March 27, 2009. Inventions will be accepted between the hours of 1:00 and 4:00 only.

Name of Invention

Name of Student Inventor *(please verify spelling – this will be used for awards)* Grade

Student Address *(used to mail NYS Invention Convention material)* Home Phone

Parent email Teacher email

School Name Invention Convention Coordinator School Phone / Cell Phone

PROBLEM TO BE SOLVED

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INVENTOR'S SOLUTION

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