

Bosch Future Mobility Challenge Registration Form



BOSCH

Invented for life

Team name:

Last name & First name:
(Of team leader)

Email address:

Cell phone:

**Last name(s)/First name(s)
of other team member(s):**

1:

Email address:

Cell phone:

2:

Email address:

Cell phone:

3:

Email address:

Cell phone:

4:

Email address:

Cell phone:

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University Name:

**Address & website
of University:**

Academic program:

**Name of supervising
Professor:**
(if applicable)

Motivation: