

BottleSumo Time Trial Scoresheet

Division (circle one) Jr Sr	Team ID _____ Team Name _____	Round (circle one) 1 2
Unknown Start was Correct?	Y N	
Number of Bottles pushed off	0 1 2 3 (Sr Only)	
Did the robot stay on the table for 3 sec after last bottle?	Y N	
CHECK ONE BELOW ____ Completion Time (if all bottles off and robot on table and robot stopped for at least 10 sec; do not include 10 sec after stop) Record BOTH times	<input type="text"/>	<input type="text"/>
Elapsed (from Zero) Record BOTH times		Remaining (from 1.20 sec)
OR ____ Survival time (if bottles left, robot falls off table or robot still moving)		
Judge's Initials	_____	
Team Member's Initials	_____	

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