

REGISTRATION FORM

Please complete this registration form for each seminar you plan to attend. Mail or fax your completed registration along with payment to:

Sherry Lane, Director
Math and Science Education Partnership
UA Fort Smith – Echols Bldg. 110
5210 Grand Ave. – PO Box 3649
Fort Smith, AR 72913
Fax: 479-788-7255
Phone: 479-788-7257
Email: slane@uafortsmith.edu

Name of Seminar: _____

Date of Seminar: _____

Participant Name: _____

School District: _____

School Name: _____

School Address: _____

Teaching Assignment: _____

School Phone: _____ Home Phone: _____

Email Address: _____

Amount and Method of Payment:

School District PO # _____

Personal Check _____

Other _____