

The Traits of Writing

PLEASE FEEL FREE TO
DUPLICATE FOR
ADDITIONAL APPLICANTS

REGISTRATION FORM (Please type or print)

Registration fee of \$20 per person must accompany application. Sorry, there will be no refunds for cancellations or nonattendance.

PLEASE COMPLETE – ALL INFORMATION IS NECESSARY FOR REGISTRATION.

Teacher _____ Grade _____

Home Address (for confirmation) _____

City _____ State _____ Zip _____

Teacher _____ Grade _____

Home Address (for confirmation) _____

City _____ State _____ Zip _____

Summer Contact _____ Phone Number (_____) _____

Administrator's Name _____

School Name _____ School Phone (_____) _____

School Address _____

City _____ State _____ Zip _____

**Enclosed is check # _____ made payable to: S.C.O.E. – Private Schools
in the amount of \$ _____ for _____ number of applicants (\$20 per person).**

Please register us for the following location:

___ **Orange:** August 2 & 3 and December 3, 2004

___ **Dublin:** August 5 & 6 and December 2, 2004

SIGNATURES

The undersigned agree to attend all sessions:

Teacher _____

Teacher _____

I approve the above teachers' attendance.

Administrator _____

Return this registration form

With check to:

**Private School Liaison
S.C.O.E. Office of Private Schools
P.O. Box 269003
Sacramento, CA 95826-9003
(916) 228-2218**

REGISTRATION DEADLINE – JUNE 18, 2004 – SPACE LIMITED!

Confirmation will be mailed to your home the middle of July. Site directions will be included with confirmation.