Application

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | | |
|  | Please Print Clearly | | |
| **School Contact Information** | | | |
| School Name | | |  |
| Street Address | | |  |
| City | | |  |
| Zip Code | | |  |
| Phone | | |  |
| Email | | |  |
|  | | | |
| **Summer Contact Information** | | | |
| Street Address | | |  |
| City | | |  |
| Zip Code | | |  |
| Phone | | |  |
| Email | | |  |
| Classes and grade(s) you teach: | |  | |
|  | | | |

RETURN APPLICATION TO:

Peggy Norris

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