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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