



Summer Workshop 2009

Mail-In Registration Form

Registration deadline is May 25, 2009

Last Name _____ First Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Other Phone _____

School District _____

You MUST be an MENC member. Please provide I.D.# _____

E-mail address (required) _____

** An e-mail confirmation will be sent upon receipt of form and payment

____ Check here if you would like to be included on the *Colleague Networking List* to be distributed at the workshop

What is your current teaching assignment?

Include grade level (s):

Please number, in order of importance, which strands of the workshop interest you:

Classroom Music __ Instrumental Music __ Vocal Music __ Technology __ Spec. Ed. __

Please mail form, along with check for \$65 made out to NJMEA, to:

NJMEA Summer Workshop

c/o Sue Mark

3 MacKenzie Ct.

Sewell, NJ 08080

For more information or to register on line, go to: www.njmeasummerworkshcp.com