



**2007-2008  
District Registration**



School District:	
District's JASON Coordinator:	
School Name:	
School Street Address:	Town/State/Zip
Email:	Phone: Fax:
Number of JASON Teachers: _____ (Proposed fee of \$760 per class packet)	
Proposed Number of Students to attend JASON Event _____	
Location and type of event is TBA – this number at this time is for planning purposes only.	
<b>Summer Conference (2 days): July 11, July 12</b>	
Proposed number of Teachers to attend Summer Conference: _____	
Cost: TBA	
<b>Note:</b>	
<ul style="list-style-type: none"><li>• Cost of curriculum is not included in the above price.</li><li>• Teachers new to the project must also attend New Teacher Training.</li></ul>	

**NOTE: This form must be completed (one per district) in addition to the TEACHER REGISTRATION FORM distributed following receipt of this form.**

<b>District Approval</b>	
_____	_____
Print Name	Print Title
_____	_____
Authorizing Signature	Today's Date

**Please fax completed form to: (516) 333-6432**  
Carolann James, Supervisor  
Nassau BOCES - Outdoor and Environmental Education  
Phone: (516) 396-2264