

Registration Form for Florida Advocacy Day – April 7, 2010 (8 am – 7 pm)

*Full Name:

Home Address:

City:

Zip:

Email Address:

Phone:

Teaching Level:

- Elementary
- Middle
- Secondary
- College
- Other

If you selected “Other” above, please specify:

School Affiliation:

**Please list your state Senator:

**Please list your House Representative and District:

**See

<http://www.flsenate.gov/Legislators/index.cfm?Mode=Find%20Your%20Legislators&Submenu=3&Tab=legislators&CFID=182044040&CFTOKEN=68690078> to locate your legislators.

Will you need overnight accommodations? Yes No

Are you interested in carpooling? Yes No

* Please bring your business card or calling card that you can leave with your contact information.