

THE WHOLE CHILD SUMMIT

WINTER CONFERENCE REGISTRATION FORM

School District:				
Address:				
			Email:	
Attendee:				
Name:				
Winter Conference Re	gistration Fee is \$75 per p	erson.		
Payment made by:	Check Enclosed	Purchase Order Enclosed	Purchase Order to Follow	

Return this **registration** form to:

Natalie Mitchell Rural Schools Association Warren Hall, 275 Flex Cornell University Ithaca, NY 14853

Make checks payable to: Rural Schools Association

Questions: Nam33@Cornell.edu or 607-255-8709