



2005 Wake Education Summit
April 28, 2005
General Registration Form

Seats are allocated at the Summit according to the following categories. Please select the ONE category that identifies your participation at the Summit:

- o Business or corporation
o Community, nonprofit or civic organization
o Parent representative
o Elected official

(NOTE: WCPSS employees should use the Teacher and Administrator registration forms.)



Please complete the following information:

Name _____

Organization/Affiliation _____

Address _____

City _____ Zip _____

Telephone _____

E-mail _____



My contribution of \$ _____ is enclosed. (Registration fee is \$25.)

Please charge my credit card for \$ _____.

Charge Card #: _____ Exp. _____

Signature: _____

I/We pledge _____ to the 2005 Wake Education Summit. Please send an invoice.

Signature: _____ Date: _____



Please return registration form to Lashley Russ at Wake Education Partnership
706-A Hillsborough Street, Raleigh, N.C. 27603
Phone: (919) 821-7609 ext. 21 Fax: (919) 821-7637 Email: lruss@wakeedpartnership.org

Make checks payable to Wake Education Partnership