

# FACS New Teacher Inservice

September 19-20, 2012

4-H Center

#1 Four-H Way

Little Rock, AR 72223

1-888-821-2544

**For new teachers who have taught 0-3 years, and returning teachers who have been back 0-3 years.**

Teacher's Name: \_\_\_\_\_

School Name: \_\_\_\_\_

School Address: \_\_\_\_\_

City

State

Zip

School Telephone: \_\_\_\_\_

Home Telephone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

## Teacher:

I wish to attend this inservice. I am either a new teacher who has taught 3 years or less, or I am a returning teacher who has been back in the classroom 3 years or less.

\_\_\_\_\_  
Teacher's Signature

\_\_\_\_\_  
Number of years taught

## Superintendent:

I give my consent for this teacher to attend this inservice and to support the travel, registration, and other expenses.

\_\_\_\_\_  
Superintendent's Signature

**Deadline for Registration August 31, 2012 (Postmarked)**

**No refunds after this date.**

To complete the registration, you must mail this form along with a check or purchase order for \$250 to the Arch Ford Education Cooperative. Registration does not cover lodging. If you have questions please call 501-682-1115.

**Registration Fee: \$250**

**Method of Payment:**  Enclosed School Check # \_\_\_\_\_  Enclosed Personal Check # \_\_\_\_\_

Purchase Order # \_\_\_\_\_ Organization Issuing PO: \_\_\_\_\_

**Make Checks or Purchase Orders**

**PAYABLE TO:  
MAILED TO:**

**Arch Ford Educational Cooperative**  
ATTN: Mary Boyer  
101 Bulldog Drive  
Plumerville, AR 72127

**Registration forms with PO# may be**

**FAXED TO:**

[mary.boyer@archford.org](mailto:mary.boyer@archford.org)

501.354.6496