

# The Reading Institute, Inc.

## Leading Literacy Change Registration Form

(each participant must complete a registration form)

**Deadline: October 27, 2006**

**Name** \_\_\_\_\_

**Home Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

**Street Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**School Name** \_\_\_\_\_

**School Phone** \_\_\_\_\_ **School Fax** \_\_\_\_\_

**School Street Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Grade/Special** \_\_\_\_\_

### Please check your lunch selection:

**11/16**   **11/17**   **11/18**

_____	_____	_____	<b>Caesar salad with grilled chicken</b>
_____	_____	_____	<b>Caesar salad</b>
_____	_____	_____	<b>Greek salad</b>
_____	_____	_____	<b>Greek wrap</b>
_____	_____	_____	<b>Grilled chicken burrito wrap</b>

(all salad dressing is on the side)

**Method of Payment: \$450.00** (\$395.00 if you register on or before October 17, 2006)

Registration form **cannot** be processed without accompanying purchase order, check, money order or credit card number. Please include attendee and institute names on purchase order or check.

\_\_\_\_\_ **Purchase Order #** \_\_\_\_\_  
(must be faxed or attached to registration form)

\_\_\_\_\_ **Check/Money Order**  
(make check payable to The Reading Institute)

\_\_\_\_\_ **Credit Card**  
\_\_\_\_\_ Visa   \_\_\_\_\_ Master Card   \_\_\_\_\_ American Express  
Account Number \_\_\_\_\_  
Expiration Date \_\_\_\_\_  
Print Name \_\_\_\_\_  
Cardholder Signature \_\_\_\_\_

### Two easy ways to register:

#### 1. Fax to:

The Reading Institute  
413.458.8777

#### 2. Mail to:

The Reading Institute  
430 Main Street  
Williamstown, MA 01267

#### questions?

call 413.458.9995 or  
email janetjstratton@aol.com