

2015 – 2016 Executive Leadership Study Group

REGISTRATION FORM

NAME _____

TITLE _____

SCHOOL DISTRICT _____

ADDRESS _____

OFFICE PHONE _____

E-MAIL ADDRESS _____

Check (/) (if applicable)

_____ I wish to register for the 2015-16 Executive Leadership Study Group.

_____ Our District is a member of the WNYESC

Check (/) one

_____ Please bill the district.

_____ I have enclosed a check for \$200.00/\$275.00 (non-members) for the four sessions, made payable to the WNYESC.

Please return to:

Western New York Educational Service Council
University at Buffalo
222 Baldy Hall
Buffalo, NY 14260-1000
(716) 645-2932

Scan and email to: wnyesc@buffalo.edu
or FAX (716) 645-3840