



School Name: _____

Name(s) of student(s):

- | | |
|----------|-----------|
| 1. _____ | 7. _____ |
| 2. _____ | 8. _____ |
| 3. _____ | 9. _____ |
| 4. _____ | 10. _____ |
| 5. _____ | 11. _____ |
| 6. _____ | 12. _____ |

Name(s) of chaperone(s)/teacher(s) who will attend:

- | | |
|----------|--------------|
| 1. _____ | Email: _____ |
| 2. _____ | |
| 3. _____ | |

Those who wish to attend must:

- Be listed on this application
- Complete the behavior form (*students only)
- Pay the \$16.00 (non-profit) fee

Return applications to **NHYES, PO BOX 228, Moultonborough, NH 03254**

We look forward to seeing you on Thursday, May 28, 2009 at Plymouth State University (Boyd Hall) for this year's conference. Registration is at 8:30 am, we will begin promptly at 9:00am, break for lunch, and end promptly at 3:30pm.

Remember to visit <http://www.nhyes.org> for updates!!!