

Constitution-in-Action Lab Registration Form

Before submitting this form, please make sure you have read the Pre-visit Preparation and Requirements page, and that your students will be prepared for their visit.

Complete the following form **In Large and Legible Print** and fax **at Least Three Weeks in Advance** to:

Education Team: (E-mail) learninglab@nara.gov (Fax) 202-357-5925

Is this registration for one group or two? Check one:

One group for one two-hour lab experience

Two groups from the same school:

Date of visit:

1st choice: _____

2nd choice: _____

Lab Time:

10 -12 (Arrival 9:50)

12:30 - 2:30 (Arrival 12:20)

Both (Two groups in rotation from the same school from 9:50 to 2:30)

Teacher's Name: _____

School Name: _____

School Address: _____

City, State, Zip Code: _____

E-mail: _____

Work Telephone: _____

Work Fax: _____

Cell: *** _____ *** required for day of visit

Number of students: _____

Number of teachers: _____

Number of other chaperones: _____

(We ask that there be 1 chaperone for every 10 students)

Grade level: _____

Type of class (U.S. history, civics, language arts, etc.) _____

Special Needs Accommodations? _____