Registration Form

Please tell us which workshop you will attend:

- ____ July 15–16 in Boston
- ___ July 30–31 in Lancaster & Leominster
- ____ August 13–14 in Manchester
- ___ November 8–9 in Pittsfield

Name:

School or District & Grade level Taught (if applicable):

Institutional Affiliation (if applicable):

Home Address:

City:

State:

Zip:

Email (Required):

Registration fee: \$25 (to cover lunches on both days)

Payment:

____Check is enclosed (payable to MHS)

____Visa ___MasterCard ___American Express ___Discover

Card Number:

Expiration Date:

Signature:

Name on Card:

Please print this form, fill it out, and return it with your payment to:

Kathleen Barker Massachusetts Historical Society 1154 Boylston Street Boston, MA 02215

**Directions to all meeting places will be emailed to participants prior to the beginning of each workshop.