

APPLICATION FORM

Community Languages Association of New Zealand (CLANZ)
Application for Support to attend CLESOL Conference 1-4 October 2010
Venue: Kings High School, Dunedin

(NOTE: Your School needs to be a registered member of CLANZ to qualify for a grant)

Name of Community Language School:

Contact Person:

Position in School:

Address:

Email:

Telephone: Daytime

Evening

Mobile

CLANZ Membership

Is your school a member of CLANZ?

YES

NO

Does your school want to become a member?

YES

NO

Please enclose registration fee with this application \$40.00 for organisation \$30.00 Individual (waged)
\$20.00 (unwaged)

Please fill out a form for each person intending to attend CLESOL in Dunedin

Name of person attending CLESOL	Date/s attending	Position in School

Provide a brief statement on how attendance at this conference will help your school?

Budget

Item	Cost per person
Registration fee	
Travel	
GRAND TOTAL per person	

Declaration: I understand the conditions to be met by our organisation.

Signature of contact person

Date

Endorsed by CLANZ representative

Signature

Position in organisation

Date

Please send your completed form by mail, fax or email to:

MAIL: Paardekooper and Associates, P O Box 41002, Eastbourne, LOWER HUTT

FAX: 04 562 8269

EMAIL: events@paardekooper.co.nz