

VERMONT MIDDLE LEVEL SCHOLAR LEADER AWARDS
Plumley Armory, Norwich University, Northfield, VT
Wednesday, June 6, 2018
2018 AWARD NOMINATIONS & REGISTRATION FORM
 Sponsored by the Vermont Association for Middle Level Education and the New England League of Middle Schools

This nomination form and reservation request must be received **NO LATER THAN May 4, 2018**
 Registrations cannot be accepted after this date - so please be sure to register on time!

Principal _____ School _____
 Street _____
 Town _____ Zip _____
 Telephone () _____ Fax () _____ Email: _____

I nominate the student(s) listed below, to receive a Vermont Scholar Leader Award for 2018
 I certify by my signature that each has met the stipulated scholastic, leadership, and personal criteria.

Signature of Principal (required)

PLEASE **PRINT NAMES CLEARLY** and **LEGIBLY** - This is how they will appear on the awards and in the program!

1. SCHOLAR LEADER (first) _____ (last) _____
2. SCHOLAR LEADER (first) _____ (last) _____

PLEASE NOTE:

1. Checks should be payable to the New England League of Middle Schools. Purchase orders & credit cards accepted.
2. Registration confirmations sent by email to the Principal or designated contact. Congratulations letters from NELMS and directions to the banquet will be mailed to your school.
3. Mail, fax, or email this form and payment information to NELMS (see below)

Is the school a member of the New England League of Middle Schools?	Circle One YES NO
Is the school a member of the Vermont Association for Middle Level Education?	YES NO

Choose One Only: 4 (\$159) 8 (\$319) or 10 (\$399)	\$	
Scholar Leader must be included in your seat count at your table.		
Non-member schools (\$40 for each Scholar Leader)	\$	
Total		
Copy of Signed Purchase Order		
Payment Enclosed	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Please Bill (Mastercard, Visa or Discover)	Expiration date	CSV
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
_____ Cardholder Signature		_____ Billing Zip Code:

To simplify the process, your school is responsible for guest attendance.
 The facility will not allow us to alter table set up the night of the event. We cannot add extra seats for last minute guests.

Return this registration to:
 New England League of Middle Schools, 50 High Street, Suite 10, North Andover, MA 01845
 P: (978) 557-9311 F: (978) 557-9312 E-mail: kwilmarth@nelms.org