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**NORTH MISSISSIPPI STUDENT COUNCIL WORKSHOP  
REGISTRATION FORM  
WEDNESDAY – NOVEMBER 4, 2009**

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**Advanced registration is requested.**

**Registration must be postmarked no later than Thursday, October 22, 2009**

The fee for the workshop is \$15.00 for each student council and \$7.00 for each member and each advisor attending the workshop. Please complete this form and mail to the following address:

The University of Mississippi  
Office of Academic Competitions  
Justin Phillips, Project Coordinator  
Post Office Box 9  
University, MS 38677-0009

or you may fax this form to: 662-915-1535  
Attention: Justin Phillips

**Please send only the student council fee of \$15 with this registration form.** Please make the check payable to *The University of Mississippi*. Individual fees will be collected at the registration desk.

**Please print legibly or type.**

Name of School \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

School Telephone \_\_\_\_\_ School E-mail \_\_\_\_\_

Advisors and Chaperones \_\_\_\_\_ Senior High \_\_\_\_\_ Junior High \_\_\_\_\_

Advisor's Name \_\_\_\_\_ Title \_\_\_\_\_

Advisor's Name \_\_\_\_\_ Title \_\_\_\_\_

Advisor's E-mail Address \_\_\_\_\_

**Student Council Members' names – additional names may be listed on the back of this registration form**

1. \_\_\_\_\_ 12. \_\_\_\_\_

2. \_\_\_\_\_ 13. \_\_\_\_\_

3. \_\_\_\_\_ 14. \_\_\_\_\_

4. \_\_\_\_\_ 15. \_\_\_\_\_

5. \_\_\_\_\_ 16. \_\_\_\_\_

6. \_\_\_\_\_ 17. \_\_\_\_\_

7. \_\_\_\_\_ 18. \_\_\_\_\_

8. \_\_\_\_\_ 19. \_\_\_\_\_

9. \_\_\_\_\_ 20. \_\_\_\_\_

10. \_\_\_\_\_ 21. \_\_\_\_\_

11. \_\_\_\_\_ 22. \_\_\_\_\_