



2009 Conference Registration Form

To register for the 2009 TNCHE Conference, please provide the following information:

NAME: _____

HOME MAILING ADDRESS:

_____ *Street*

_____ *City* *State* *ZIP Code*

E-MAIL: _____

I am (please check all that apply):

_____ an elementary school teacher.

_____ a curriculum supervisor

_____ a middle school teacher.

_____ a high school history teacher.

_____ other (please explain) _____

_____ already a member of TNCHE (\$60) _____ a new member conference attendee (\$75)

SCHOOL NAME OR DISTRICT: _____

Please send registration form and check payable to TNCHE to:

**TNCHE
P.O. Box 40234
Nashville, TN 37204**