

Sonia Kovalevsky High School Mathematics Days Registration Form

Hosted by
Mississippi State University and
Mississippi University for Women

Sponsored by
The Association for Women in Mathematics and
Mississippi State University

Teacher Information:

Sponsoring teacher's name: _____

Home address: _____
(please include city, state,
and zip code) _____

Evening (home) phone number: _____
(please include area code)

e-mail address: _____

Names of other teachers attending: _____

School Information:

School name: _____

School district: _____

School county: _____

School mailing address: _____
(please include city, state,
and zip code) _____

School phone number: () _____

School FAX number () _____

(please include area code in both numbers)

Number of students registering from this school: _____

Number of teachers registering from this school: _____

Number of vehicles requiring a parking pass: _____

YES NO May MSU have permission to post your school's name and a link to your school's web site as a participant? If so, provide the web site address, and sign below, or have the appropriate school official sign before returning the registration form.

http:// _____

_____ (Signature)

Mail registration to: Sonia Kovalevsky Day
Department of Mathematics and Statistics
Drawer MA
Mississippi State, Mississippi 39762-9715