

CHICAGO NON-PUBLIC SCHOOLS' SCIENCE EXPOSITION

Name & Title:

Affiliation:

Address:

Phone:

Fax:

E-mail:

Please make corrections

This year's contribution: _____

Contribution specifications: _____

Judge(s) names _____

Judging () Saturday or () Sunday

Staying for awards presentation () yes () no

Not able to send judges, would like for us to judge for you ()

Would like to have copies of abstracts in your category(s) faxed to you before the fair ()

Categories for abstracts: _____

Please return by e-mail: hospitalkeepers@lpzoo.org, fax to 312-742-7823 or by mail to

Susan Moy-LaVeau
IJAS REG.II, Awards Chair
826 N. Gibbons Ave
Arlington Heights, IL 60004