

2019 Ag Day School Registration Form



March 26, 2019
Fonner Park

Teacher Name: _____

School Name: _____

School Address: _____

Phone: _____ Email: _____

Yes, my school would like to participate in Ag Day 2019

If yes, approximate number of students ____ attending in _____ class
Teacher's Name

If yes, approximate number of students ____ attending in _____ class
Teacher's Name

If yes, approximate number of students ____ attending in _____ class
Teacher's Name

If yes, approximate number of students ____ attending in _____ class
Teacher's Name

If yes, approximate number of students ____ attending in _____ class
Teacher's Name

No, my school will be unable to participate.

Please fill out and return this form to the following by Friday, February 8, 2019:

Cindy Johnson
Grand Island Chamber of Commerce
309 W Second St
Grand Island, NE 68801

Phone: 308.382.9210
Fax: 308.382.1154
Email: cjohnson@gichamber.com