

Revised Registration Application Modeling Instruction Science Workshops

Briarwood Christian School
Birmingham, AL
June, 2008

Name _____ Position _____

Home Address _____ City _____ State _____ Zip _____

Telephone number _____ Email _____

School Name _____

School Address _____ City _____ State _____ Zip _____

Telephone number _____ Email _____

Please enroll me in the following **Workshop**: (Please check appropriate **spaces**.)
CEU Credit will be given to Workshop participants.

_____ Modeling Instruction in **Physics: Mechanics**

_____ Modeling Instruction in **Physical Science**

_____ **Complete Workshop: June 9-27 (\$975.00)**

_____ **Week #1**, June 9-13 (\$425.00/week)

_____ **Week #2**, June 16-20 (\$425.00/week)

_____ **Week #3**, June 23-27 (\$425.00/week)

*Lunch is provided Monday through Thursday of each Workshop week.

Checks may be made payable to Briarwood Christian School. A non-refundable deposit of \$200.00 should be included for each Applicant.

We request enrollment as soon as possible. Enrollment will be OPEN until the Workshops are filled.

Dr. Byrle Kynerd
Workshops Director
Briarwood Christian School
6255 Cahaba Valley Road
Birmingham, AL 35242

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