Premier's Reading Challenge
SCHOOL REGISTRATION FORM

School registration is to be carried out by the school contact person. The names of individual students are not required at this stage.

Please fill in the details and submit this form to: Project Manager
Premier's Reading Challenge
Level 2 West, Education Centre
31 Flinders Street
ADELAIDE SA 5000
Courier: R11/09A
Fax: 8226 3830

At the start of the year schools are required to indicate:

- that the school will be participating in the Premier's Reading Challenge
- an estimated number of students taking part at each year level
- the name and email address of the school contact person
- a second school contact person may be included this year

<table>
<thead>
<tr>
<th>Site Number:</th>
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</thead>
<tbody>
<tr>
<td>School Name:</td>
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</tbody>
</table>

Preferred School Name to appear on student awards:

| Phone: |

Sector:
DECS AISSA: CATHOLIC EDUCATION SA:

School Contact Person:

Email:

Second School Contact Person:

Email:

Estimated number of children participating from each year level:

<table>
<thead>
<tr>
<th>Reception</th>
<th>Year 5</th>
<th>Year 10</th>
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<tbody>
<tr>
<td>Year 1</td>
<td>Year 6</td>
<td>Year 11</td>
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<tr>
<td>Year 2</td>
<td>Year 7</td>
<td>Year 12</td>
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<td>Year 3</td>
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<td>Year 4</td>
<td>Year 9</td>
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</tbody>
</table>

SCHOOL CONTACT STAFF MEMBER