



## Professional Circle Registration Form

- Please Check:**
- In-service Credit - \$125.00 per credit
  - Non Credit - \$40.00 per credit

Please write check or money order to Peconic Teacher Center and mail to address below.

**Title of Professional Circle:** \_\_\_\_\_

\_\_\_\_\_

**Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

\_\_\_\_\_

**Home phone:** \_\_\_\_\_ **School Phone:** \_\_\_\_\_

**E-Mail:** \_\_\_\_\_

**School Building:** \_\_\_\_\_

**Subject:** \_\_\_\_\_

**Grade Level:** \_\_\_\_\_

**School Address:** \_\_\_\_\_

**Mail to:**  
**Peconic Teacher Center**  
**141 Narrow Lane, Southampton, New York 11968**