Washington State Coalition for International Education P-20 International Ed Summit:

Teaching & Learning in a Global Community

Registration Information
Please enter your registration information below:

Name: __________________________________________

Email: __________________________________________
This is very important since it’s our main way to communicate with you.

Job Title or Role: __________________________________________

Organization (or School): __________________________________________

Address:
Please indicate the address where you prefer to have us contact you
Is this your ___ Work Address or ___ Home Address?
Street Address: __________________________________________
City/State/Zip: __________________________________________

Home Phone: __________________
Work Phone: __________________ Fax: __________________

How did you hear about the Summit? Check all that apply:
☐ Email    ☐ Web site    ☐ Flyer (by mail)    ☐ Flyer (posted/handout)
☐ Word of mouth/personal contact
☐ From this organization: __________________________________________

How would you like to be involved in shaping the future of International Education in Washington?
Please check all boxes that apply.

☐ I want to support International Education in Washington state and keep informed. Sign me up for action@internationaledwa.org.

☐ I would like to join the general membership of the Coalition. Sign me up for coalition@internationaledwa.org.

☐ I am ready to be a committed advocate for International Education. Sign me up for advocacy@internationaledwa.org.

☐ I would not like to be involved at all at this time.