



Educational Experiences

Presents:

Gradventure Preview

February 27 or March 6, 2010

Start Time 10AM



School Name: _____

School Address: _____

School City: _____ State: _____ Zip Code: _____

School Phone #: () _____ Fax #: () _____

8th Grade Sponsor: Mr. Ms. Mrs. (circle one) _____

Email # 1: _____ Email # 2: _____

Chosen Date for Preview: _____ **Feb 27** _____ **Mar 6**

Our school is interested in attending Gradventure in _____2010 _____2011 _____2012

Number in Current 8th Grade Class _____

Please fill out below the two names of those attending:

1) _____ Cell # () _____

2) _____ Cell # () _____



Fax to: 386-575-2357

1780-5 Doyle Rd. Deltona, FL 32725

1-800-761-2556

