

Registration Form

Classics Day at the College of Charleston

November 4, 2017

Name of School: _____

City: _____

Name of Sponsor: _____

of Students: _____ x \$1

of Sponsors: _____ (free)

of Chaperones: _____ (free)

TOTAL COST: \$ _____

*Please attach a list of all participants (students, chaperones, and sponsors.

Deadlines

Submit this form (print or e-mail) by **October 20**.

Payment can be made by check or cash through the mail, or at registration on Nov. 4.

Sent To

Andrew T. Alwine (alwineat@cofc.edu)

Classics Department

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Charleston, SC 29424