## The Classical Association of Virginia

The Eighty-Eighth Annual Latin Tournament March 19-23, 2018

## **REGISTRATION FORM**

Please print out this form and type or print the following information. This form must be POSTMARKED no later than February 14, 2018.

School Name:				
School Address:				
School Phone: School Fax:				
	ent/private/homeschool) et/governor's/charter)	Highe 1 2	est Latin Level Offered 3 4 5+	
	Entering Students, E-mail and I			mahana fan thia waan
Name	CAV members. Those teaching I		none Number (required)	Yes/No/New
1 (411)			(224222)	
Name and Title of per	son to whom tests and directions	s will be sent:		
Number of Entrants:  Latin I  Latin II  Intermediate Latin Prose  Advanced Latin Prose  Advanced Latin Poetry  # of tests x \$3.00		rose se	N.B. Your entrant registration fee is waived if your school is entering for the first time or first time in 5 years. Please write "FREE" by the dollar sign. We will check our records to verify.  \$	
CAV Membership \$20.00 per teacher (after Nov. 1, 2017)		)17) =	\$	
	Total amount enclosed	=	\$	
regular early ac	n administration week: administration March 19-23, 20 dministration March 12-16, 2013 on spring break for both adminis	8	please contact me to discuss	s other options
	ant, payable to the <b>Classical Asso</b> to the CAV Tournament Registra		rginia, must be mailed with	this form, postmarked by

**Kevin Jefferson** 

5809 Chase Commons Ct. #205 Burke, VA 22015 kevinsjefferson@gmail.com

He must receive BOTH this form AND your check for your registration to be processed.