

EGA608

**GEORGIA HIGH SCHOOL GRADUATION TESTS**  
**Pre-Administration Workshops**  
**February 14-16, 2006**

**R.S.V.P. Form**

**PLEASE PRINT OUT THIS FORM AND COMPLETE THE FOLLOWING INFORMATION:**

NAME: _____	WORK NAME: _____
HOME ADDRESS: _____	WORK ADDRESS: _____
CITY, STATE, ZIP: _____	CITY, STATE, ZIP: _____
HOME PHONE: _____	WORK PHONE: _____
HOME E-MAIL: _____	WORK FAX: _____
	WORK E-MAIL: _____

**ATTENDANCE (CHECK ONE):**

- Yes, I will be able to attend the workshop.
- No, I will not be able to attend. \_\_\_\_\_ will attend in my place.

**LOCATION AND DATE ATTENDING (CHECK ONE):**

- February 14, 2006 9 AM – 3 PM** University of Georgia Tifton Campus Conference Center  
15 RDC Road  
Tifton, GA 31793  
229-386-3416
- February 15, 2006 9 AM – 3 PM** Georgia Sports Hall of Fame  
301 Cherry Street  
Macon, GA 31201  
478-752-1585
- February 16, 2006 9 AM – 3 PM** Holiday Inn  
2265 Kingston Court  
Marietta, GA 30067  
770-952-7581

**Return via fax or mail to:**

Sandy Bentley  
Data Recognition Corporation  
13490 Bass Lake Road  
Maple Grove, MN 55311  
Phone: 1-800-826-2368 X2203  
Fax: 763-268-2418

Do you have any other special requirements/requests?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature

**Please return this form whether  
you will be attending or not.**

**Return form by January 13, 2006**