

2018 Principal & Assistant Principal of the Year Ceremony
Reservation Form

Date of reservation: _____

Contact Name: _____

Organization/School: _____

Phone: _____ **Fax:** _____

E-mail: _____

| | |
|---------------------------------------|------------------------|
| Non-DASA member reservations | _____ x \$55 = \$_____ |
| DASA member reservations | _____ x \$40 = \$_____ |
| Retiring Administrator 2016-17 | _____ x \$0 = \$_____ |
| Total # Reservations: | _____ = \$_____ |

Make checks payable to: DASA

Check# _____ is enclosed for \$ _____

Attendees:

Name of finalist _____

(If finalist will be part of this table print name on #1 line below. If not print name on line above so that we know what group you would like to be seated with.)

| | | | |
|-----------|-------------|-----|----|
| 1. _____ | DASA Member | Yes | No |
| 2. _____ | DASA Member | Yes | No |
| 3. _____ | DASA Member | Yes | No |
| 4. _____ | DASA Member | Yes | No |
| 5. _____ | DASA Member | Yes | No |
| 6. _____ | DASA Member | Yes | No |
| 7. _____ | DASA Member | Yes | No |
| 8. _____ | DASA Member | Yes | No |
| 9. _____ | DASA Member | Yes | No |
| 10. _____ | DASA Member | Yes | No |

Please complete & return this form with payment, no later than

Thursday, March 8th, 2018 to:

DASA -Dade Association of School Administrators

1498 NE 2nd Ave, Suite 200, Miami, FL 33132

Phone (305) 579-0092 / Fax (305) 579-1068