

REGISTRATION FORM



The Holocaust: From Persecution to the Final Solution

28th Annual Arkansas Holocaust Education Conference

Jones Center for Families

Springdale, Arkansas



ARHolocaustPrograms.org

Conference Date: Friday, October 25, 2019
8:15 a.m. – 3:00 p.m.

Registration Deadline: Friday, October 11, 2019



Name: _____

Mailing Address: _____

Email: _____

Name of School & School Address: _____

School Business Office (if using a purchase order):

Make check payable to: AHEC

1) LUNCH FEES: Indicate number(s) attending in box below

@ \$20.00 per registrant.

Please be aware of the possibility that not all students from one school may be able to sit together in any one workshop due to limited space in rooms. Thanks for your cooperation.

2) Attach list of names of registrants.

3) Participants are encouraged to select a variety of sessions; however, session participation is first come, first served.

4) The students should come with some prior knowledge of the Holocaust to fully participate in the session discussions.

TOTAL \$\$ LUNCH AMOUNT included with registration form.

OR

TOTAL \$\$ LUNCH AMOUNT TO BE BILLED TO SCHOOL BUSINESS OFFICE (PO)
Attach purchase order with this form.

An optional donation is appreciated. Registrations do not cover all expenses. We are non-profit 501c3.

Donation Amount:

SPONSORS



Abraham Jakubowicz Fund for Holocaust Education

Temple Shalom of Northwest Arkansas

Congregation Etz Chaim of Northwest Arkansas

Department of WLLC, Jewish Studies, University of Arkansas

MAIL REGISTRATION TO
ARKANSAS HOLOCAUST EDUCATION COMMITTEE
PO BOX # 1371 SPRINGDALE, AR 72765-1371

*Please enclose check or money order with
registration.
Thank you.*



For additional information call
Dr. Grace Donoho, 479-750-4930