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## Preliminary Interest Form

School: \_\_\_\_\_ School Board: \_\_\_\_\_

Mr./  Ms.: \_\_\_\_\_

Position: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Extension: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Should we contact you by e-mail or by phone? \_\_\_\_\_

What is the BEST time of day to reach you? \_\_\_\_\_

**Grades of students interested in the program:** \_\_\_\_\_

### What time period would work best for your school?

(Please note that the January-March period is **ONLY** available for elementary schools.)

October – December     January – March     April - June

### What day of the week would you prefer?

(Please note that we cannot guarantee these time periods as they are based upon a first come, first serve basis.)

Tuesday     Wednesday     Thursday

### What time of the day works best for a session?

(Please note that we cannot guarantee these time periods as they are based upon a first come, first serve basis.)

Lunch Time     After School     During Class

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please complete the areas above and email or fax it back to Harmony Movement at [nyanful@harmony.ca](mailto:nyanful@harmony.ca) or 416.385.2644.

Harmony Movement would like to thank you for your continued support and for your interest in our Diversity Education Programs.

**\*\*Please note that there is a cost associated with this program.** Please contact Harmony Movement if you have any questions regarding the pricing of each program. This form is simply a **preliminary interest form** designed for schools to express their interest in the Harmony Movement Diversity Education Programs. A formal program contract will be sent to you at a later date to confirm your registration. **\*\***