



Thank you for your interest in participating in the *Give Literacy a Hand Read-a-thon*. Please contact us at [readathon@cuedspeech.org](mailto:readathon@cuedspeech.org) so that we may do our part to ensure your school's participation success.

Name of School \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone # \_\_\_\_\_ FAX # \_\_\_\_\_

Grade or age levels: \_\_\_\_\_ to \_\_\_\_\_ Total Number of Students \_\_\_\_\_

Total Number of Students Participating in the Read-a-thon \_\_\_\_\_

Does your school support deaf/hard of hearing students? YES NO

Does your school support a Cued Speech Program? YES NO

Read-a-thon Coordinator: \_\_\_\_\_

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

**Agreement:**

My school will participate in the *Give Literacy a Hand Read-a-thon* during October, 2010. Our school will encourage student-wide participation and support. We will allow the NCSA to post the Read-a-thon on the school's web site.

Our school will retain 40% of the proceeds collected, and forward the remaining 60% to the National Cued Speech Association; 5619 McLean Drive, Bethesda, MD 20814-1021.

Principal's Name: \_\_\_\_\_

Principal's Signature: \_\_\_\_\_ Date: \_\_\_\_\_