Spectroscopy Society of Pittsburgh
Society for Analytical Chemists of Pittsburgh

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FARADAY LECTURE TICKET REQUEST FORM

(Post-marked by Friday, September 29, 2017)

TEACHER NAME _____

SCHOOL NAME _____

Circle Student Grade(s) 7 8 9 10 11 12

SCHOOL ADDRESS _____

CITY, STATE, ZIP _____

HOME PHONE _____ SCHOOL PHONE _____

E-MAIL ADDRESS _____

Circle Lecture Day TUESDAY Nov 14 WEDNESDAY Nov 15 EITHER

(100 limit Middle School) (40 limit High School)

(50 limit High School)

NUMBER OF TICKETS (including chaperones) _____

Extra tickets (if available) _____

_____ Check here if attending the Tuesday, November 14, 2017, evening presentation and indicate the number attending. No tickets are required. Number attending _____

Notes or comments if needed:

_____

Please return to Sam and Cally Shouse, 427 W Wayne Street, Butler, PA 16001 OR by email to shousec@pittcon.org with all the necessary information.