



2009 National Shakespeare Competition
School Participation Form
The English-Speaking Union of the United States

BOSTON BRANCH

**Please use this form to let us know that your school will be participating in the
2009 Shakespeare Competition.**

Name of School: _____

Address _____

Phone: _____ Fax: _____

School Coordinator: _____

Home Phone: _____ Work Phone: _____

Email: _____ Fax: _____

Hours when Coordinator might be reached at school:

Please return this form by December 1, 2008 to:

**ESU Boston Shakespeare Competition Coordinator
Christina Porter
26 Irving Street
Revere, MA 02151**

**Tel: 718-223-1491
bostonshakespeareesu@yahoo.com**