

**Teacher's WISH LIST of potential programs**

**Make a copy of this for your Site Coordinator and bring this with you to the Fall Booking Day**

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

Teacher: \_\_\_\_\_ Grade \_\_\_\_\_

My first choice: \_\_\_\_\_  
(Program Title & Sponsor Organization)

Fee and/or Mileage: \_\_\_\_\_

Preferred Date & Time \_\_\_\_\_

Alternate Date & Time \_\_\_\_\_

Second choice: \_\_\_\_\_  
(Program Title & Sponsor Organization)

Fee and/or Mileage: \_\_\_\_\_

Preferred Date & Time \_\_\_\_\_

Alternate Date & Time \_\_\_\_\_

Third choice: \_\_\_\_\_  
(Program Title & Sponsor Organization)

Fee and/or Mileage: \_\_\_\_\_

Preferred Date & Time \_\_\_\_\_

Alternate Date & Time \_\_\_\_\_

Fourth choice: \_\_\_\_\_  
(Program Title & Sponsor Organization)

Fee and/or Mileage: \_\_\_\_\_

Preferred Date & Time \_\_\_\_\_

Alternate Date & Time \_\_\_\_\_

NOTES: \_\_\_\_\_  
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