

# Registration Form for EPA's SunWise Program

Your Name: \_\_\_\_\_

How did you learn about SunWise? \_\_\_\_\_

## About Your Organization

My organization is a:  Childcare Center / Pre-K       Museum       Civic Group

Science or Health Ed. Center       Not-for-profit       Health Org.       University

Government       Other: \_\_\_\_\_

**Org. Name:** \_\_\_\_\_

**Org. Address:** \_\_\_\_\_

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

Phone: (\_\_\_\_\_) \_\_\_\_\_ County: \_\_\_\_\_

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

Org. Web site: \_\_\_\_\_

**Mailing Address:** Please send materials to:  My Organization (listed above)  
 Another Address (enter below)

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

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

Phone: (\_\_\_\_\_) \_\_\_\_\_

Number of students **you plan to teach** SunWise in a year: \_\_\_\_\_

How do you plan to use the kit (i.e., on testing days as a fun break for students, during our solar unit, or at the beginning of outdoor activities, during rainy day P.E. activities, etc.)? \_\_\_\_\_

**Language:**     English Materials **OR**     Spanish Materials?

In keeping with the EPA's commitment to program evaluation, are you willing to be contacted

**INCOMPLETE FORMS MAY NOT BE PROCESSED**

Attachment 1b  
periodically regarding SunWise?

Yes

No

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