



WNY INVENTION CONVENTION 2008

# SCHOOL PARTICIPATION FORM

**OUR SCHOOL WOULD LOVE TO PARTICIPATE IN THIS EVENT!**

Please mail this form by February 1st, 2008 to the address below if your school wishes to participate in this year's WNY Invention Convention.

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School

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School Address

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Staff Contact Person

School Phone / Cell Phone

E-mail \_\_\_\_\_ (To help us save on postage)

Please circle the grade levels expected to participate: K 1 2 3 4 5 6 7 8  
A maximum of 9 submissions per school may be submitted for the Regional Exhibit.

Comments & Questions Welcome!


Mail to: Western New York Invention Convention  
625 Lafayette Avenue  
Buffalo, NY 14222