

2023 Outstanding Educators Registration Form

Wednesday, April 26, 2023

Sheraton Hartford South, Rocky Hill, CT



Please include payment with registration. 2 Ways of Paying- Check or Pay Pal

Make checks payable to "Connecticut PTA".

PAY PAL AVAILABLE! VISIT OUR WEBSITE at www.ctpta.org to register and take advantage of Pay Pal!

Awards Dinner

\$45.00 per person

Winners of the Outstanding
Administrator Awards are
guests of CT PTA.

Registration opens at 6:00 pm
Dinner 6:45 pm

Dinner Choices

*Chicken Marsala with wild mushrooms
and a Sicilian wine sauce*

Served with

Bibb lettuce salad

Potato, vegetables, rolls & butter

Coffee, tea

Dessert

Passion Fruit Cheesecake

Vegetarian Option

Fried Rice with Veggie Kebabs

Served with

Bibb lettuce salad

Rolls & butter

Coffee, tea

Dessert

Passion Fruit Cheesecake

Cash Bar

Please let us know if you have any
special dietary needs.

Pay Pal or checks accepted

Register & pay on our website at

www.ctpta.org

or

Mail registration with payment to

CT PTA

540 Washington Avenue,

North Haven, CT 06473

No reservations accepted after

April 10, 2023

Questions?

Email us at office@ctpta.org or call

203-691-9585

Are you registering a winner of the CT PTA Outstanding Administrator Awards? _____

Please remember, they are guests of CT PTA.

Please provide their information below

Name of winner (if applicable): _____

Award Receiving: _____

Name of PTA or Council: _____

Contact Person: _____

Dinner Choice: (circle one choice please) **Chicken or Fried Rice with Veggie Kebabs**

Name 1 **Name of PTA:** _____

Town: _____

Print Name: _____

Position: _____

Email Address: _____

Dinner Choice: (circle one choice please) **Chicken or Fried Rice with Veggie Kebabs**

Name 2 **Name of PTA:** _____

Town: _____

Print Name: _____

Position: _____

Email Address: _____

Dinner Choice: (circle one choice please) **Chicken or Fried Rice with Veggie Kebabs**

Name 3 **Name of PTA:** _____

Town: _____

Print Name: _____

Position: _____

Email Address: _____

Dinner Choice: (circle one choice please) **Chicken or Fried Rice with Veggie Kebabs**

Name 4 **Name of PTA:** _____

Town: _____

Print Name: _____

Position: _____

Email Address: _____

Dinner Choice: (circle one choice please) **Chicken or Fried Rice with Veggie Kebabs**

(Additional registrations on reverse side if needed)

Name of PTA: _____

Town: _____

Print Name: _____

Position: _____

Email Address: _____

Dinner Choice: (circle one choice please) **Chicken or Fried Rice with Veggie Kebabs**

Name of PTA: _____

Town: _____

Print Name: _____

Position: _____

Email Address: _____

Dinner Choice: (circle one choice please) **Chicken or Fried Rice with Veggie Kebabs**

Name of PTA: _____

Town: _____

Print Name: _____

Position: _____

Email Address: _____

Dinner Choice: (circle one choice please) **Chicken or Fried Rice with Veggie Kebabs**

Name of PTA: _____

Town: _____

Print Name: _____

Position: _____

Email Address: _____

Dinner Choice: (circle one choice please) **Chicken or Fried Rice with Veggie Kebabs**

Name of PTA: _____

Town: _____

Print Name: _____

Position: _____

Email Address: _____

Dinner Choice: (circle one choice please) **Chicken or Fried Rice with Veggie Kebabs**

