

# EXPLORE



**National Oceanic and Atmospheric  
Administration (NOAA)  
Office of Ocean Exploration  
*Learning Ocean Science through Ocean Exploration*  
Professional Development**

**REGISTRATION FORM  
October 17, 2009 Introductory Workshop  
New England Aquarium, Boston**

**Name:**

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**Mailing Address:**

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**Phone No.:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**School:**

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**Grade Level(s) You Teach:**

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**Subject(s) You Teach:**

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**Special Needs: (Deaf, hearing or sight impaired, mobility needs, dietary restrictions)**

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**Did you participate in the May 2009 NOAA Ocean Exploration workshop at the New England Aquarium?**

**Yes \_\_\_\_\_ No \_\_\_\_\_**

**E-mail this form as an attachment to Teacher Resource Center at the New England Aquarium: [trc@neaq.org](mailto:trc@neaq.org)**

**Questions? Call Teacher Resource Center at 617-973-6590**