

ARE YOU INTERESTED IN TEACHING A CONTINUING EDUCATION CLASS? IF SO, PLEASE FILL OUT THE FORM BELOW AND RETURN IT TO THE CONTINUING EDUCATION OFFICE.

**SEND FORM TO: CONTINUING EDUCATION OFFICE
4111 LEGION DR.
HAMBURG, NY 14075**

NAME _____

ADDRESS _____

PHONE NUMBER(S) _____

EMAIL _____

CLASS DESCRIPTION: _____
