



# Democracy 101

New Jersey Student/Parent Mock Election

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## School Enrollment Form

To participate in the 2008 Student/Parent Mock Election, print this form, type or print clearly all of the information requested and mail it to your local Mock Election coordinator at the address below.

There is no charge to enroll your school. Your school's only commitment is to receive the ballot, print and distribute it to your students and report the results from your school before 3 p.m., Thursday, October 30.

Your school's Mock Election coordinator will be sent via E-mail an ID and password to report your results online. Questions? See [www.njmockelection.org](http://www.njmockelection.org).

School Name \_\_\_\_\_

School Mock Election Coordinator \_\_\_\_\_

Title of Mock Election Coordinator \_\_\_\_\_

Coordinator's E-Mail Address \_\_\_\_\_

Coordinator Phone \_\_\_\_\_ Backup Phone \_\_\_\_\_

School Mailing Address \_\_\_\_\_

School City \_\_\_\_\_ State **N.J.** ZIP \_\_\_\_\_

New Jersey County Where School Is Located \_\_\_\_\_

N.J. Congressional District Where School Is Located \_\_\_\_\_

Estimated Number of Students Who Will Vote In Your School \_\_\_\_\_

**Mail this form to:**