

APPLICATION
for the
Shenandoah Valley Technology Consortium

School Division, University,
or Organization Name

Contact Person

Contact Person E-Mail Address

Mailing Address

Phone and Fax Numbers

 phone

 fax

Website (if any)

Method of Payment

Complete and mail to:

Karen Campbell
SVTC Treasurer
Harrisonburg City Schools
101 North Main Street, 4th Floor
Harrisonburg, VA 22802