**CITB NI ‘ADOPT A SCHOOL’ SCHEME**

**School Registration Form**

|  |  |
| --- | --- |
| School |  |
| Address |  |
| Email |  |
| Phone No |  |
| Contact Name |  |
| Contact Phone No |  |
| Website |  |
| **DECLARATION** | |
| I confirm that I give permission for CITB NI to publish and share the above contact details with any interested parties in relation to the promotion of the CITB NI ‘Adopt a School’ Scheme.  Signed: Date:  Position: | |