

CALIFORNIA DEPARTMENT OF EDUCATION
Curriculum Frameworks and Instructional Resources Division
Clearinghouse for Specialized Media and Technology
1430 N Street, Suite 3207
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Braille-N-Teach List Service Member Registration Form

The purpose of Braille-N-Teach List Service (BNT) is to exchange ideas, share materials, provide resources, and support one another professionally.

Rules: Electronic etiquette is expected of all users. In registering with BNT, I agree to use the service only for professional purposes. Selling of, or advertising, products or services is forbidden. Posting of resumes or other material not related to this service is prohibited.

Registration Form

To become a registered user of BNT, please complete the registration form below and e-mail it to CSMT@cde.ca.gov or fax it to 916-323-9732.

Name of Educational Agency: _____

First Name: _____ Last Name _____

Title: _____ E-Mail: _____

Phone: _____ FAX: _____

I am employed by a California public school, district, or county office of education.

Yes _____ Other reason for requesting registration: _____

I serve students who are:

Visually Impaired ___ Hearing Impaired ___ Learning Disabled ___

Deaf/Blind ___ Orthopedic Impairment ___ Multiple Disabilities ___

Other: _____

I understand and agree to the rules set by BNT.

Signature: _____ Date: _____