



④ ACTIVITY FORM

2008-2009

Activity 1 2 3 4+

All students must have an opportunity to participate in *at least* three (3) No Place for Hate® activities.

School Name

Contact 1 Name Title/Role E-mail Address

Contact 2 Name Title/Role E-mail Address

Principal Name E-mail Address

Phone Fax Website

Address

City State Zip

1) Activity Title*: _____

** Please note that signing the Resolution of Respect is the first step to becoming a No Place for Hate® school and therefore cannot be counted as an activity.*

2) Activity Dates - Began: _____ **Completed:** _____

3) Activity Description (WHO, WHAT, WHERE, WHEN, HOW):

Please send completed Activity Forms to 4635 Southwest Freeway, Houston, TX 77027-7169,
via fax to (713) 627-2011 or e-mail to lting@adl.org.
For more information call (713) 627-3490 or visit www.adl.org/southwest.

4) Number of attendees: _____

5) Supplemental materials (please include copies):

- Photographs (with description, including names of individuals and affiliations) Press release
 PowerPoint Presentation Newspaper/Newsletter articles DVD/video tape
 Other (please specify): _____