

# Registration Form

## Quebec Roots 2018-2019

General Information	
First name:	Family Name:
Educational Institution:	School Board:
School Address:	Postal Code:
City:	Province:
Telephone at school:	Fax:
Other telephone where we can reach you:	
E-mail:	

Information related to the group involved in the project:	
<i>You can only register one of your groups</i>	
Number of students who will be involved in the project:	
Subject:	Grade:
How many hours a week do you teach these students?:	
On a scale of 1 to 5, with 5 being strongest, how would you rate your level of knowledge in relation to the following technologies?	
E-mail:	Google Docs:
Blog, forum:	Videoconference:
Audio Tools:	Video:

Information to evaluate your knowledge in photography		
Do you own a camera?	YES	NO
What kind of camera do you own?	Film camera	Digital camera
What file format(s) do you shoot in?		
How often do you take pictures?		
What do you enjoy shooting most?		
Is there camera instruction at your school?	YES	NO
Do you teach photography?	YES	NO
If no, is there anyone who teaches photography at your school and could help you?	YES	NO
What would be the two most important aspects of photography that you think your students would benefit from?		
How many cameras are available to your students at school?		
<i>Blue Metropolis will provide you with a camera, but an extra one will be required.</i>		

PLEASE EMAIL THE FORM FILLED OUT TO: [info@bluemetropolis.org](mailto:info@bluemetropolis.org)