

Listening Session Registration Card

Date: _____ Time: _____ Name: _____

City of Residence: _____ State: _____

Your relationship to ISD 191 (check all that apply):

- ☐ District Student
- ☐ Parent/Guardian of a district student
- ☐ District resident
- ☐ District taxpayer
- ☐ District staff person

Topic: _____

Is your topic related to a board meeting agenda item? Yes No Unsure

~~Give this card to the superintendent if you wish to address the Board during the listening session.~~