

Higher Education Referral Of Delaware

6 South Railroad Avenue
P.O. Box 189
Camden-Wyoming, Delaware 19934-0189

Telephone
(302) 697-2107

February 18, 2022

Dear Admissions Officer:

Please accept this correspondence as my invitation for your institution to participate at ***Delaware College Night '22*** which is upcoming on **April 28, 2022**. The program will run from 7:00 PM to 9:00 PM. Invitations and flyers are distributed to all Delaware High Schools with emphasis on New Castle County.

We have partnered again with the New Castle County Vocational District and the event will be held in the Gymnasium at **Paul M. Hodgson Vocational Technical High School**, 2575 Glasgow Avenue, Newark, DE.

The details are as follows:

Delaware College Night '22 is scheduled for **April 28, 2022**. The program will run from 7:00 P.M. to 9:00 P.M.. The location will be **Paul M. Hodgson Vocational Technical High School**, 2575 Glasgow Avenue, Newark, DE in the Gymnasium. The registration fee is \$95.00.

Additional information, including the current participant list and the general information sheet will be available at www.collegefair.org beginning 30 days prior to the event. If you would like to participate, please complete the enclosed registration form and return it. **The form can be mailed or emailed to the address shown on the form.**

If there are any questions, comments or you require additional information, please contact me either by phone or email at smiller@collegefair.org

Sincerely,



Stephen D. Miller
Chair, College Night Committee

Enclosure

**Higher Education Referral of Delaware
Registration Form**

**Delaware College Night '22
April 28, 2022**

College Name _____

Address _____

Telephone Number _____ Fax Number _____

Name of Director of Admissions _____

Name of Admissions Representative _____

_____ **YES**, I will attend **Delaware College Night '22** on **April 28, 2022**. Site - **Paul M. Hodgson Vocational Technical High School** in the Gymnasium, 2575 Glasgow Avenue, Newark, DE. 19713. Registration fee - \$95.00

_____ **NO**, I will not be attending the program.

_____ **Please remove our institution from your mailing list for future programs.**

_____ Check enclosed _____ Check will be sent under separate cover

Credit card payments can be made via Paypal using smiller@collegefair.org as the payee

Will you accept confirmation and other information by E-mail? _____ Yes _____ No

If yes, please provide E-Mail Address: _____

Please make check payable and mail to: **Higher Education Referral of Delaware**
P.O. Box 189
Camden, Delaware 19934

Telephone Number - Voice - (302) 697-2107

Email - info@collegefair.org