

**ARCHAEOLOGICAL AWARENESS AND HISTORIC PRESERVATION MONTH
ACTIVITY/EVENT FOR MAY 2012**

Date and time of event: _____

Name of event: _____

Location (address, town): _____

Location (site name): _____

Contact person: _____

Contact telephone number: _____

Contact e-mail address: _____

Sponsor: _____

Cost/Admission: _____

Description of event: _____

Your name: _____

Telephone number _____

E-mail _____

Please return this form to Sali Underwood at State Historic Preservation Office, c/o the Nevada State Museum, Las Vegas, 309 S. Valley View Blvd., Las Vegas, NV 89107, fax to (702) 486-5172, or e-mail to sunderwood@shpo.nv.gov by **February 14, 2012**. If you have any questions please call Ms. Underwood (702) 486-5011