

Court with Class Registration Form 2023-2024

School District

Click here to enter text.

Number Attending (60 Max)

Click here to enter text.

(please include teachers, chaperones and students)

School Address (City and Zip)

Click here to enter text.

Teacher's Name

Teacher's Email (REQUIRED*)

Click here to enter text.

Cell Phone Number (REQUIRED*)

Click here to enter text.

Best Time To Contact

Click here to enter text.

Emergency Contact Number (For Day of Argument)

Click here to enter text.

My preferred date is: Click here to enter text. **My second choice is:** Click here to enter text.

I prefer to attend the hearing at: 9:45 a.m. 10:45 a.m. 1:30 p.m. Any

**You will receive confirmation for your assigned date and time and a synopsis of the case you are scheduled to attend via email.*

Return the form to the attention of Grace Marchello

By email: Grace.Marchello@wicourts.gov

By fax: (608) 266-1298

By mail: Wisconsin Supreme Court
P.O. Box 1688
Madison, WI 53701-1688

| Oral Argument Schedule* | |
|--------------------------------|--------------------|
| September 11, 13, 14 | January 24, 25, 26 |
| October 2, 9, 16 | February 12, 13 |
| November 21 | March 18, 20 |
| December 11, 19 | April 15, 17 |
| | May 13, 14 |

*subject to change

** Court with Class not available