



FLYER DISTRIBUTION REQUEST FORM

Instructions

1. Hand deliver or email the flyer to the District Office with the *Flyer Distribution Request Form*, PDF or JPG format preferred.
2. After review, you will be notified of the decision by email.
3. The approved flyer will be transmitted to parents as appropriate to the timeline and posted online.
4. All flyers must be in English and Spanish with the following GJUESD disclaimer clearly located and legible:

English:

This is not a Galt Joint Union Elementary School District-sponsored program, and the Galt Joint Union Elementary School District accepts no liability or responsibility for injuries, illnesses, or damages that may occur as a result of this program/activity.

Spanish:

Este no es un programa patrocinado por el Distrito Unificado de Escuelas Primarias de Galt y el Distrito Unificado de Escuelas Primarias de Galt no acepta responsabilidad alguna por lesiones, enfermedades o daños que ocurran como resultado de este programa/actividad.

5. For questions, please contact Susan Padilla at 209-744-4545 ext. 338 or email spadilla@galt.k12.ca.us

Please complete the following:

Name of Organization: _____

Name of Contact Person: _____

Contact Telephone: _____ Email: _____

Is this a Non-Profit Organization? Yes _____ No _____

Description of Subject Matter/Activity:

For distribution to the following grade levels, please mark:

TK K 1 2 3 4 5 6 7 8

Flyers will not be sent out during the first two weeks of school.

FOR OFFICE USE ONLY

Date Flyer Submitted: _____

Flyer Approved: Yes _____ No _____ (Reason) _____

Signature of District Representative: _____ Date: _____