

Marion Public Schools

Activity Request

Today's Date: _____ Date(s) of activity _____

Sponsoring Organization/Class: _____

Current Balance of Sponsoring Organization/Class: _____

Activity: _____

Description of Activity (who, what, where, how) _____

Estimated costs: include admission fees, meal costs, transportation and how those costs will be paid _____

Any and all monies gathered from any activity must immediately be deposited with the Superintendent's Office. Expenses for any activity must be approved by the Superintendent.

Chaperones for the Activity (Signatures):

1. _____

3. _____

2. _____

4. _____

Submitted by

Date

Principal Approval

Date

Superintendent Approval

Date

Contact Numbers that you should take with you on your trip:

Chris Arrington 231-743-2486 x 1

Michael Jarvis - Bus Garage 231-743-2486 x 4

Elem. School Office 231-743-2486 x 3

High School Office 231-743-2486 x 2