



## Flyer Distribution Request

Name of Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Purpose of Flyer: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please attach a sample of the flyer you wish to have distributed.**

**All materials distributed must contain the following statement:**

*"The Chehalis School District does not sponsor this event and the District assumes no responsibility for it. In consideration of the privilege to distribute materials, the Chehalis School District shall be held harmless from any cause of action filed in any court or administrative tribunal arising out of the distribution of these materials, including costs, attorney's fees and judgments or awards."*

Distribute to: PK-K-1-2    3 4-5                      Distribution Requested: Post Send Home Counter

Distribute to: 6-7-8    9-10-11-12                      Distribution Requested: Post Counter Email

The organization will be responsible for the copies being counted out for each individual school. Please note the following student counts for each school:

**9-10-11-12 (WFW) = 50 for counter or posters    3-4-5 (OSE)= 27 sets of 30 pre 3 hole punched**  
**6-7-8 (CMS)= 50 for counter or posters                      PK-K-1-2 (JLE)= 31 sets of 24 and 1 set of 20**

### District Office Approval for Distribution

The attached form(s) are approved for distribution to the above note schools. While we are approving this distribution we are not endorsing participation in the activities listed above.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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Dr. Christine Moloney  
Superintendent

Trisha Smith  
Assistant Superintendent

Heather C. Pinkerton  
Director of Business and Operations