

PENN CAMBRIA SCHOOL DISTRICT
**REQUEST FOR THE SCHOOL BAND OR GROUPS
 To PARTICIPATE IN COMMUNITY ACTIVITIES**

DATE _____

ORGANIZATION MAKING REQUEST _____

IF SPONSORED BY SCHOOL AFFILIATED GROUP, PLEASE GIVE NAME _____

SCHOOL BAND OR OTHER GROUP REQUESTED _____

TYPE OF ACTIVITY AND/OR PURPOSE FOR WHICH REQUESTED _____

DATE(S) REQUESTED _____ NUMBER OF HOURS _____

WHERE SHOULD THE BAND/GROUP REPORT? _____

AT WHAT TIME? _____ HOURS OF PROGRAM: FROM _____ TO _____

PARADE ROUTE (IF APPLICABLE) _____

If transportation costs are involved, we agree to pay for the transportation of the band from the point of boarding or pickup and return. Per Board Policy 230 AR, the Superintendent is authorized to waive such transportation fees for groups within the district which have the marching band appear in local parades.

SIGNED _____

PERSON MAKING REQUEST

<p><u>PRINCIPAL'S RECOMMENDATION:</u></p> <p>Date(s) cleared _____ Yes _____ No _____ Approval _____ Yes _____ No _____</p> <p>_____ Principal's Signature _____ Date _____</p> <p>_____ Band Director's Signature _____ Date _____</p> <hr/> <p><u>DISTRICT USE ONLY</u></p> <p>Approved _____ Not Approved _____ Reason _____</p> <p>_____ Transportation Fee Waived _____ Yes _____ No _____</p> <p>Total Cost _____</p> <p>_____ For the Board of School Directors, Superintendent _____ Date _____</p>	<p><u>REQUESTING ORGANIZATION</u></p> <p>_____ Name of Organization _____</p> <p>_____ Mailing Address _____</p> <p>_____ Submitted by _____</p> <p>_____ Title (or office in requesting organization) _____</p> <p>_____ Mailing Address _____</p> <p>_____ Telephone Number _____</p> <hr style="border-top: 1px dashed black;"/> <p>Cc: _____ Originator _____ Business Office _____ Principal _____ Band Director _____ File</p>
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