

**SPEARFISH SCHOOL DISTRICT
DISTRIBUTION OF PROMOTIONAL MATERIAL REQUEST**

4910/1800 FM

THIS FORM MUST BE COMPLETED AND APPROVED BY THE BUILDING PRINCIPAL PRIOR TO DISTRIBUTION OF PROMOTIONAL MATERIAL.

Name: _____

Phone Number: _____

Date and time of day of intended display or distribution: _____

Location where material will be displayed or distributed: _____

Grade(s) of students to whom the display or distribution is intended: _____

PLEASE GIVE A BRIEF DESCRIPTION OF MATERIALS TO BE DISPLAYED OR DISTRIBUTED.

Accepted by Principal _____ Date _____

Not Accepted by Principal _____ Date _____

Reason for Non-Acceptance: