



Lake Havasu Unified School District No.

2200 Havasupai Boulevard, Lake Havasu City, AZ 86403-3798
928.505.6902 Fax 928.505.6999 www.lhusd.org

Request for Flyer/Handout Distribution

Two weeks minimum request time

Organization: _____ Date of Request: _____

Are there fees or charges involved with the program? Yes No

Are you affiliated with a non-profit organization? Yes No

Indicate Requests Below

- For:** Distribution in a designated area - flyers will be placed in an accessible location and an announcement will be made to students to pick up if interested
- Posting – flyer(s) will be hung in well trafficked area of school
- Class handouts – handouts must be clipped in groups of 30 for each class in which to be distributed
- Share digitally – flyer will be shared via social media and/or digital communication

To: Students** Grade Level(s): _____ Staff

Sites: Lake Havasu High School Thunderbolt Middle School

Havasupai Jamaica Nautilus Oro Grande Smoketree Starline

Describe activity **AND** attach flyer. Include all material that you are requesting be distributed.

**LHUSD is committed to student learning. Student learning time is precious. How will your request enhance student learning?

Solicitation of employees and/or students by any organization (profit or nonprofit) or charitable group must have advance approval. LHUSD shall strive to safeguard the students and their parents from money-raising plans of outside organizations, commercial enterprises, and individuals. This policy shall apply particularly to ticket sales and sales of articles or services except those directly sponsored by school authorities or school organizations. At no time, will flyers be handed out directly to students or their parents.

Once approval is given, it is the responsibility of your organization to contact the schools, show this approval form, and provide any materials to be distributed with material divided as required. At no time will any of the schools copy, make prints, fold, or count any of your organizations materials that you wish to distribute. Please give the schools as much notice as possible before you would like your flyers to be announced or posted.

Contact Name: _____ Email: _____ Phone #: _____

APPROVED* NOT APPROVED * Please note that the principal of each school has the final authority for approval.

Signature: (Communications and Community Outreach Coordinator) _____ Date _____

Received: _____ Sites Notified: _____ Requestor Notified: _____