Galt Joint Union Elementary School District

FLYER DISTRIBUTION REQUEST FORM

1. *Hand deliver or email the flyer to the District Office with the Flyer Distribution Request Form, PDF or JPG format preferred.*
2. *After review, you will be notified of the decision by email.*
3. *The approved flyer will be transmitted to parents as appropriate to the timeline and posted online.*
4. *All flyers must be in English and Spanish with the following GJUESD disclaimer clearly located and legible:*
   English:
   This is not a Galt Joint Union Elementary School District sponsored program and the Galt Joint Union Elementary School District accepts no liability or responsibility for injuries, illnesses or damages occurring as a result of this program/activity.
   Spanish:
   Este no es un programa patrocinado por el Distrito Unificado de Escuelas Primarias de Galt y el Distrito Unificado de Escuelas Primarias de Galt no acepta responsabilidad alguna por lesiones, enfermedades o daños que ocurran como resultado de este programa/actividad.
5. *For questions, please contact Susan Padilla at 209-744-4545 ext. 338 or email spadilla@galt.k12.ca.us*

***P*lease complete the following:**

Name of Organization: _____

Name of Contact Person: _____

Contact Telephone: _____ Email: _____

Is this a Non-Profit Organization? Yes _____ No _____

Description of Subject Matter/Activity: _____

Please distribute to (please check one):

Preschool ~ 6th _____ Preschool ~ 8th _____ TK ~ 6th grade _____ TK ~ 8th _____ 7th ~ 8th _____

_____ I ***only*** would like a message to be sent to families through the GJUESD messaging system and post the flyers on the GJUESD website under Community News. (*No hard copies to be distributed*)

_____ I ***will*** be making hard copies of flyers *and* would like a message to be sent to families through the GJUESD messaging system and for the flyers to be posted on the GJUESD website under Community News.

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Flyers and activity-related communications will be distributed as needed. Communications may be held for up to two weeks following the start of the school year. However, if an activity is scheduled to occur within that two-week period, the appropriate flyer or message will be distributed in advance to ensure families receive adequate notice.

FOR OFFICE USE ONLY

Date Flyer Submitted: _____

Flyer Approved: Yes_____ No_____ (Reason) _____

Signature of District Representative: _____ Date: _____

Hard Copies Sent (if applicable): _____ Message Sent: _____ Flyer Posted: _____

Revised - 8/24/26