

APPLICATION FOR COMMUNITY FLYER POSTING

 For NON-PROFIT 501c3 ORGANIZATIONS

NAME OF ORGANIZATION SUBMITTING FLYER: _____

NAME OF CONTACT PERSON (Please Print)	FAX # or Email	PHONE NUMBER
_____	_____	_____
SIGNATURE OF PERSON MAKING REQUEST	DATE OF REQUEST	YES _____ NO _____ (IS 501(c)(3) ON FILE?)
_____	_____	_____

THE FOLLOWING CRITERIA MUST BE MET FOR FLYERS TO BE APPROVED FOR POSTING:

- ◆ The flyer MUST contain the following disclaimer: This activity is not related to or sponsored by the Cypress-Fairbanks Independent School District.
- ◆ The material on the flyer must be age and/or developmentally appropriate for students. The flyer must clearly advertise an activity for students.
- ◆ The group distributing the flyer must be identified by the Internal Revenue Service as a non-profit 501(c)(3) organization. If you do not currently have a 501(c)(3) IRS letter on file, one MUST accompany this request. (OTHER AGENCIES/ COMPANIES MAY CONTACT THE COMMUNITY ENGAGEMENT DEPT FOR ADVERTISING OPTIONS)
- ◆ No fundraising flyers are allowed from groups except those sponsored by schools or the district.
- ◆ The flyer must not cause disruption to the operation and discipline of the school.
- ◆ **Attach a copy of the flyer to this Flyer Distribution Form and submit along with payment (checks or money orders only – made payable to CFISD) to:**
 CFISD FLYER APPROVAL - 11330 Falcon Rd, Houston, TX 77064
 (or drop-off at this address during regular school district hours).
 For more information, call 281-517-6367 or email gail.spencer@cfisd.net.

FLYER DISTRIBUTION GUIDELINES: NON-SCHOOL RELATED FLYERS WILL NOT BE DISTRIBUTED THROUGH INDIVIDUAL SCHOOL CAMPUSES. PLEASE DO NOT CONTACT SCHOOLS.

- ◆ Requests and payment for flyer approval must be received by the 20th of the month prior to posting date.
- ◆ The cost for posting your flyer is \$50 per month requested below.
- ◆ Approved flyers will be posted to the CFISD Community Flyers webpage (www.cfisd.net/communityflyers) for the months indicated on this application, from the 1st through last day of the month.

PLEASE CIRCLE THE MONTH(S) DESIRED FOR POSTING TO THE COMMUNITY FLYERS WEBSITE. THE COST PER MONTH IS \$50.00:

JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE
JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER

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(For Office Use Only)

Payment Rec'd _____

APPROVED – Gail Spencer, General Administration _____

_____ Date

REASON FOR NON-APPROVAL (IF APPLICABLE) _____