Charter Request Date of event: Event: Contact info: Requesting campus(full name): Program name (i.e. band, choir) Work #: Cell #: Contact person: Total # of students: _____ Total # of adults: How many buses needed? _____ 1 Charter holds 56 passengers Pick up information: Load time: _____ Departure time: ___ Pick up/Address: Drop off/Address: **Return information:** Departure time: Load time: Pick up/Address: Drop off/Address: Additional info: Exact location on campus to pick up (ie: north side, by tennis courts, front or back of building) **FINE ARTS OFFICE USE:** Charter: _____ Phone #_____ Charter #(s) PO# ____

Mansfield ISD Fine Arts

Return to Sheila Bell

sheilabell@misdmail.org