Group Educational Activity Student Roster

(For use by Contact Person to list enrolled school students for an activity and track receipt tof Permission forms. Mail to office with permission forms attachéd. After receipt of this from, the check for the event will be processed)

Mail to: Contract Programs, 1166 Broadway, Suite Q, Placerville, CA 95667

Group Educational Activity Name: _____

Contact Person's Name: _____

Contact Person's Phone Number: _____ E-mail: _____

Please place these enrolled school students on the Activity roster for the above named trip. Only students on this list with permission slips attached will be paid for by school funding.

School	Student No.	Student Name	Parent Name	Permission

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