

Form

SCHOOL SIGN ADVERTISEMENT REQUEST FORM

Contact Person: _____

Phone: _____

Email: _____

SIGN TEXT:

- Maximum of 3 lines
- 18 characters per line including spaces
- May include name of business, address, phone number and tag line

Line 1: _____

Line 2: _____

Line 3: _____

*Please Note: Policy provides the Milltown BOE with the authority to reject **any** request for advertising that it deems inappropriate.*

SUBSCRIPTION FEE: Check one

- Monthly (including first and last day)
- Fee is non-negotiable and will not be pro-rated.

_____ \$50 both schools (Joyce Kilmer and Parkview)

_____ \$35 Parkview only

_____ \$35 Joyce Kilmer only

MONTH/S REQUESTED

Send completed request form and payment to:

Milltown School District
Superintendent's Office
21 West Church Street
Milltown, NJ 08850

Checks payable to: Milltown Board of Education