

NSS and NGES Enrichment Program Worksheet

Please 1) coordinate with Principals and School Secretaries for approval and 2) send copy of **approved** form to the PTG members listed below:

PTG Co-Presidents (Liz Spinney/Wendy Allen) (ngesptg@gmail.com)
Treasurers (Monica Rogers/Kristin Wood) (ngesptgtreasurer@hotmail.com) (along with in-voice)
Secretary and Website Developer (Tiffany Bubriski) (tbubriski@gmail.com)

PROGRAM DETAILS:

Program Name: _____
Date(s) of Program: _____
Time(s) of Program: _____
Grade(s) involved in Program: _____
Special Needs or requests: _____

LOCATION DETAILS:

If held in school, answer questions 1-2:

1. Names of visitors: _____
2. Arrival/Departure Time of visitor(s): _____

*Please coordinate visitor badges with school office administrator

If held outside of school, answer questions 3-4: _____

3. Location: _____
4. How many buses are required (each bus holds about 50 people): _____

Enrichment Coordinator:

Phone/email: _____
Teacher in charge (Name and email): _____
Number of Chaperons required: _____

Total Cost of Program (buses not included): _____

Deposit Required? Amount and date due if yes: _____

*For any payment to be made, an **invoice** must be sent to the PTG Treasurers **at least two weeks in advance** of the event. PTG Treasurers will coordinate all payments with appropriate person/agency.

Is there a grant for this program? If yes, please provide amount of grant: _____

Estimated amount per student (whole dollar only): _____

Cost of Bus(es) (Work with Mrs. SanSoucie or Mrs. Jackman): _____

Due date for parent payment: _____

Event Contact Name:

Address: _____
Phone/Fax: _____
Email: _____

Principal Signature: _____ Date: _____