

## SCUSD Child Development Department and *Partners for School Readiness*Present the

## **SCHOOL READINESS FAIR**



## **Reservation Form**

Please complete and return no later than February 28, 2013
Please fax to (916) 399-2057, Attn: Clara Cid or mail to:
SCUSD, 5735 47th Avenue, Box 715, Sacramento, CA 95824

## Saturday, March 16, 2013

Set-up: 8:00 a.m. Event: 10:00 a.m. to 3:00 p.m.

| Date:                           |                     |                                           |
|---------------------------------|---------------------|-------------------------------------------|
| Organization Nar                | ne:                 |                                           |
|                                 |                     |                                           |
| Address:                        |                     |                                           |
|                                 |                     | Email:                                    |
| Brief description               | of service/screeni  | ng you will be providing:                 |
|                                 |                     |                                           |
|                                 |                     |                                           |
| Name(s) of partic               | pipating staff:     |                                           |
|                                 | d two (2) chairs wi |                                           |
| Call Clara at (916              | 6) 643-7858 if you  | have questions.                           |
| Thank you                       | or your particip    | pation in the 2013 School Readiness Fair. |
|                                 |                     |                                           |
| Office Use Only. Date Received: |                     | — Date Confirmation Emailed: —————        |
|                                 |                     |                                           |



