



**ARCHANGEL GABRIEL**  
**CATHOLIC SCHOOL**

## Flyer Request Form

Please fill out this PDF form by clicking in each field and entering the information requested.

**Please email the completed form to  
Amy Carlowski at [amyamo33@yahoo.com](mailto:amyamo33@yahoo.com)**

A proof of the flyer will be returned for approval.

**Please allow up to 1 week for completion of proof.**

Committee submitting request:

Name of person submitting request:

Email of person submitting request:

Date request submitted:

Date proof is needed:

Title of event:

Date of event:

Time of event:

Description of event - information for flyer:

Audience:       Kids       Parents       Other:

Please list any other information that will aide in the design of the flyer: