



School:			
Address:			
City:	State:	Zip:	
Coordinator's Name:			
Telephone:	Em	nail:	
Alternate Contact:			
Telephone:	Em	nail:	
Number of Classrooms:	Number of Stude	ents:	
School start time:	Lunch:	Dismissal:	
Jim's schedule.)  Adult/school representative v		e event:	
School representative who w	ill present the check:		
Date of fundraiser:			
—— Coins 4 Kids —— Se	ell Paper Hearts ——— Jea	an Day ——— T-Shirt Day	
——— Our school will conduc	ct its own fundraiser, (Please	e give details)	
Jim wants to help! How can	lim help your school raise m	noney for Go Jim Go?	
		om/	
School Twitter account name	: <u>@</u>		