

For Office Use Only		
Board Approved	Yes	No
Date		

**Tulare Joint Union High School District
Board Authorized School Connected Organizations
Recognition Renewal and Contact Information Form**

School Site: _____

Name of Organization: _____

Mailing Address: _____

EIN/Tax ID: _____

List of Officers

Name and Title	Address (Street, City, State, Zip)	Phone and E-mail

Primary Contact Person (include address/phone/e-mail information if not listed above): _____

Completed by: _____ Date: _____

Please return completed form to: Tulare Joint Union High School District
Business Office
426 North Blackstone Street
Tulare, CA 93274
(559) 688-2021 Phone
(559) 687-7421 Fax
laurie.vanessen@tulare.k12.ca.us