Plan of Action for PTA Commitees

2011/2012

Committee/Event Name: _____

Committee Chair(s): _____

_____

Phone Number(s)/E-mail address(es): _____

_____

_____

_____

Please detail everything possible about your event or activity (such as date(s), time(s), costs associated with event/activities, charge to families/students, and any other information about event): _____

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Board Approval: _____

Date: _____