



GEA Set Up Form

Please email completed form to mvinnedge@cwcharter.org

CWCS requests a three week notice to provide a check for a Group Educational Activity (GEA). In order to accommodate CWCS, allow the parents enough time to get permission slips turned in and time for the school office to close the GEA. Please make sure you allow at least a four (4) week minimum from the time the GEA is submitted to the date the time the activity/class begins.

CW

CV

CWEB

Semester: First

Second

GEA Information

Title:

Grade Level Range: TK to 12th grade

Vendor Name:

Vendor Contact Person:

Vendor Phone:

Street Address:

City:

County:

Coordinator/Contact Person:

Contact Person's Phone:

Contact Person's Email:

Start Date:

Last date to sign up:

End Date:

Start time:

End Time:

Day(s) of the Week:

Minimum Class Size:

Maximum Class Size:

Number of Classes: 1

Facilities Name:

Facilities Address:

Facilities Phone:

Proposed Rate Per Student Per Class Rate (ticket price)

Any Extra Notes to be added: