

LAMAR CISD
SCHOOL LOGO/SCHOOL IDENTITY ART USAGE
REQUEST FORM

**All school logos MUST come from the LCISD Graphic Arts Department
Call 832-223-0343**

I. FOR USE BY ANY SCHOOL-RELATED ORGANIZATION

Name of team, club, or organization: _____

Name of contact person: _____

Position: _____

Phone: _____ E-mail _____

Please return this form to your building Principal for administrative approval.

II. FOR USE BY ANY NON-SCHOOL RELATED ENTITY, INCLUDING MANUFACTURERS,
RETAILERS AND WHOLESALERS

Name of company _____

Contact person _____

Please return this form to Executive Director of Community Relations for administrative approval.

III. PURPOSE OF LOGO-USE

Event/Activity title: _____

How will the logo be used: _____

Start/End Date: _____

Goal to be accomplished by using this product: _____

Target audience: _____

Additional Comments: _____

Requester Signature

Date

Building Principal Approval Signature

Date

Forward with approval to the Executive Director of Community Relations.

**All approved forms must be filed with the Executive Director of Community Relations*

Lamar CISD reserves the right to deny any project that fails to comply with any aspect of the logo/identity-use policy guidelines.

Executive Director, Community Relations

Date

PCS F 5/14/10