

**San Diego Unified School District  
Lincoln High School - Associated Student Body**

**POSTER REQUEST FORM**

Name \_\_\_\_\_

Organization \_\_\_\_\_

Date \_\_\_\_\_

Date you need poster(s) by \_\_\_\_\_

Quantity of Posters \_\_\_\_\_

Content of Poster(s) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Please make sure to include location, date, times, and all other important information.)

**This form must be turned in at least three days prior to the date needed. We appreciate you cooperation with this requirement.**

If you would like to show us the set up of your poster, use the box below.

To be completed by A.S.B.

Completed on \_\_\_\_\_ By \_\_\_\_\_

Commissioner \_\_\_\_\_

Advisor \_\_\_\_\_