



CLASSROOM BUSINESS LICENSE/APPLICATION

Date: _____ Applicant (s): _____
Identify all partners

Name of Business: _____

Description of Business: _____

Please be as detailed as possible.

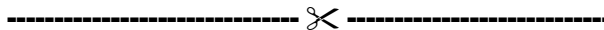
Signature of owner(s): _____

Fee: \$ _____ Paid Approved Rejected _____

Signature of bureaucrat

Comments/Notes: _____

****Post If Approved****



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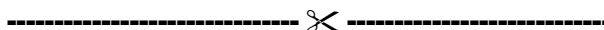
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