

Central Florida Hotel and Lodging Association 2025/2026 Adopt-A-School Program Partnership Agreement



<i>I</i> ,				_, agree
	(PROPERTY/BUSINESS REPRESENTATIVE)		(PROPERTY/BUSINESS NAME)	

TO PARTICIPATE IN THE 2025/2026 CFHLA ADOPT-A-SCHOOL PROGRAM, PARTNERING WITH

	SCHOOL)			(NAME OF COUNTY)				
Property/Business Na	ame:	School Name:	School Name:					
Address:			Address:					
City:	State: FL	Zip:	City: Orlando	City: Orlando State: FL Zip:				
Business Contact Name			Principal:	Principal:				
Position			Email Address:	Email Address:				
Telephone:	Fax	Partner in Education	Partner in Education Coordinator					
Email Address			Position	Position				
Business Contact Name 2			Telephone:		Fax:			
Email Address			Email Address	Email Address				
Partnership Activity 1 Partnership Activity 2								
Partnership Activity 2								
Partnership Activity 2 Partnership Activity 3								
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