To whom it may concern,

We are a group of teachers who want to "Honor a Teacher from Lake Worth", Maria Charron.

This is a glimpse of her journey.

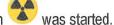
Elementary teachers are the foundation of education in action

Today Let's Connect the Dots is honored to celebrate our newest Connection; Maria Charron- a nineteenyear veteran of education and learning.

Maria was first diagnosed with endometrial cancer at the age of 33. Hoping this would be the end of the scare, Maria moved forward with surgery.

Twelve years later, the same cancer returned with a stage 4 category. An additional mass was found

around the kidney and chemotherapy along with radiation was started.



After 7 rounds of Chemo and 42 rounds of radiation, Maria lost her kidney. The healing process has been long and agonizing.

A 3rd run in with cancer yet again, shows a metastatic growth to the liver and colon; Maria is back in full

This heroic elementary teacher is still engaged in what she loves the most; teaching.

Her students love her and so do we; connecting the dots for Maria and making a difference one dot at a time.

Went .

#connectingthedots

#connectingthedotsforMaria

#teachersmakeadifference

#fightingcancertogether #nomorecancerever

Jobita Crespo & Christian Kahler

Educators



SECTION 1: ORGANIZATION INFORMATION	
1.	Organization Name:
2.	Non-Profit Status (501(c)(3) or similar):  Yes No  (If yes, please attach IRS determination letter or other documentation.)
3.	EIN (Employer Identification Number):
4.	Primary Contact Person:
	Name: Jobita Crospo Christian Kahler Phone: 501-376-8724
	Email: Jobita. Crespu@ Palmbeach Schools. org
5.	Organization Address:
	Address:
	City: State: Zip:
SECTION 2: EVENT DETAILS	
6.	Event Name or Title: Honoring a Hacher from Cake Worth
7.	ON 2: EVENT DETAILS  Event Name or Title: Honoring a Hacher from Cake WORK  Date(s) of Event: Friday NOV. 14th
8.	Time(s) of Event: Event time: 5:30 pm-8:30 pm / Plus 2 hours set-up time
9.	Location Requested: Lake WORTH Beach
10	. Brief Description of the Event or Purpose:
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	. Will the event be open to the public?  Yes No  Estimated Number of Attendees: 150 Guest

## Non-Profit Fee Waiver Request Form



## **SECTION 3: FEE WAIVER REQUEST DETAILS**

13. Type of Waiver Requested: Full Rental Fee Waiver Partial Rental Fee Waiver Deposit Fee Waiver
14. Explain how the event aligns with community benefit or public interest:  We will be honoring a Hacher from  Ollo Wirth Schools. Teach for over 20yrs.
15. Has your organization previously received a fee waiver from us?  Yes No If yes, please provide date(s):  SECTION 4: ATTACHMENTS (REQUIRED)
Please attach the following:
<ul> <li>Proof of Non-Profit Status (IRS 501(c)(3) letter or similar)</li> </ul>
<ul> <li>Certificate of Insurance naming the City of Lake Worth Beach as additional insured</li> </ul>
SECTION 5: AUTHORIZATION
Recruity that the information provided above is true and correct to the best of my knowledge. I understand that submitting this request does not guarantee approval and that additional documentation may be required.  Signature:   Signature:   Tob Ha Crespo   Chris Han Kahler  Date:   10   20   25
FOR OFFICE USE ONLY (All requests must be submitted no later than 30 days prior to the event date)  Approved Denied Additional Info Requested  Reviewed by:  Date:  Comments and Fee Amount Waived: