

# CENTER TOWNSHIP OF MARION COUNTY SMALL CLAIMS COURT

200 E. WASHINGTON STREET, SUITE G-5  
INDIANAPOLIS, INDIANA 46204  
(317) 327-5060 PHONE  
(317) 327-7844 FAX

## RESERVATION FOR "KIDS AT COURT" FRIDAY

Yes, I would like to have my class attend a "Kids at Court" Friday morning trial.

Name of school \_\_\_\_\_

Class Description (Grade and/or Subject) \_\_\_\_\_

The number of students attending (maximum 30) \_\_\_\_\_

Please circle two dates and indicate 1<sup>st</sup> choice and 2<sup>nd</sup> choice:

**FEBRUARY 2**

**MAY 18**

**SEPTEMBER 21**

**FEBRUARY 9**

**JUNE 8**

**OCTOBER 12**

**FEBRUARY 23**

**JUNE 22**

**OCTOBER 19**

**MARCH 2**

**JUNE 29**

**NOVEMBER 2**

**MARCH 9**

**JULY 13**

**NOVEMBER 9**

**MARCH 30**

**AUGUST 3**

**NOVEMBER 30**

**APRIL 13**

**AUGUST 10**

**DECEMBER 7**

**APRIL 20**

**AUGUST 17**

**DECEMBER 14**

**MAY 4**

**AUGUST 31**

**MAY 11**

**SEPTEMBER 14**

First Choice Date: \_\_\_\_\_ Second Choice Date: \_\_\_\_\_

Teacher's Name: \_\_\_\_\_

School Address: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Teacher's Signature: \_\_\_\_\_

**PLEASE RETURN THIS FORM TO THE COURT BY MAIL OR FAX AT (317) 327-7844. YOU WILL RECEIVE A CONFIRMATION FROM THE COURT ONCE YOUR DATE IS SCHEDULED.**