

Family Storytelling Night® KIT

Order Form

Please print clearly.

Date: _____

Note: This form is two pages.

Name of Agency or District Purchasing the KIT: _____

Name of Program or School Using the KIT: _____

Main Program or District Address: _____

City/State/Zip: _____

Name of Specific Site Where "KIT" Will Be Used: _____

Address of Specific Site Where "KIT" Will Be Used: _____

City/State/Zip: _____

Name of Program Director or Principal: _____

Title of Program Director or Principal: _____

Email and Phone Number of Director or Principal: _____

Fax Number of Director or Principal: _____

KIT Facilitator #1 (Name, Email, Phone): _____

KIT Facilitator #2 (Name, Email, Phone): _____

If delivery address is different from mailing address listed above, complete the following:

Delivery Address: _____

Delivery City/State/ZIP: _____

See Page Two for Ordering Specifics, Please

Order Family Storytelling Night® **KITS**: _____ Qty. x \$995.00 = \$ _____

Note: Family Storytelling Night® KITS come with materials to serve 50 Families.

Order Additional Components Packs: _____ Qty. x \$195.00 = \$ _____

Note: "Additional Components Packs" are provided in 25-Family Units.

Shipping & Handling (\$35.00 for each KIT and each Additional Components Pack).....\$ _____

Enter 6% Sales Tax Unless Tax Exempt. Tax-Exempt Subscribers: Please fax completed W-9 form (with "Tax Exempt" box checked and signature) to **208-765-1017**. This form is available at www.irs.gov (under "Forms and Pubs" heading). Thank you.

GRAND TOTAL\$ _____

T-Shirt Sizes...

Your Family Storytelling Night® **KIT** Comes with Two Official Family Storytelling Night® T-Shirts. Please specify adult sizes below [S, M, L, XL, XXL]:

Shirt #1 Size: _____

Shirt #2 Size: _____

PURCHASE ORDER NUMBER: _____

Purchase orders may be used to begin the purchase process, but are not considered payment for the Family Storytelling Night® **KIT**. A purchase order will reserve your KIT, and shipping will occur **after check is received**.

➔ To process order, please FAX this form to 208-765-1017. Your Family Storytelling Night® **KIT** Will Ship Within Three weeks of Receipt of Payment.