



## Children's Dental Health Month Teaching Kit Request Form

Please submit your request at least two weeks prior to your event to allow handling and shipping time. Kits are pre-packaged so we are unable to offer the ability for you to select which items you would like to receive. Standard kits contain: teaching guides, reproducible coloring and activity sheets, posters, stickers and an assortment of other giveaway items such as toothbrushes, toothpaste, floss, timers, disclosing tablets, brochures, tooth holders, etc.

Name of school, non-profit group or dentist: \_\_\_\_\_

\_\_\_\_\_

Mailing address (no PO boxes): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone number: \_\_\_\_\_

Date of presentation: \_\_\_\_\_

Age or school grade of children (*if multiple grades, please provide the number of children in each grade so we can send age-appropriate materials*): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Number of children: \_\_\_\_\_

Type of event (*classroom presentation, class dental office tour, community health fair, etc.*):

\_\_\_\_\_

\_\_\_\_\_

Will free dental treatment be provided as well? \_\_\_\_\_

If yes, please list types of treatment being provided: \_\_\_\_\_

\_\_\_\_\_

If yes, are children Medicaid-eligible or uninsured, low-income? \_\_\_\_\_

\_\_\_\_\_

Please return via mail or fax to:

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Phone: 517/346-9417