

Application for Sponsorship

If you have an organization that requires financial assistance in order to implement the Coloring Away Pain titles into your program, please complete the following application. By submitting this information, you agree to have the sections in bold below posted on www.ColoringAwayPain.com so that we may actively solicit financial support on your behalf. Thank you for your interest!

Name of Organization: _____
 Contact Name: _____
 Contact Phone: _____
 Contact Email: _____
 Mailing Address: _____
City, State Zip: _____

Is this for a pilot program or for full program? Pilot Full Program

How many books do you need for this program? _____

Which titles will you be using in this program?

- | | |
|--|---|
| <input type="checkbox"/> The Secret | <input type="checkbox"/> My Hero |
| <input type="checkbox"/> Playing It Safe Around Guns | <input type="checkbox"/> The Present In Me |
| <input type="checkbox"/> The Court Report | <input type="checkbox"/> The Do-Over |
| <input type="checkbox"/> The Bully | <input type="checkbox"/> Moving |
| <input type="checkbox"/> Then Came the Storms | <input type="checkbox"/> Safe In The Car |
| <input type="checkbox"/> Then Came the Water | <input type="checkbox"/> Goodbye Friend |
| <input type="checkbox"/> Then Came the Fires | <input type="checkbox"/> Special Memories |
| <input type="checkbox"/> The Day the Earth Shook | <input type="checkbox"/> Grandpa, What's Happening? |

How many children is this program intended for? _____

If this is for a pilot program, how many children is the full program intended for? _____

How will the children receive these books? _____

Will the books be for them to use primarily at your facility or to take home? _____

Is supervision or guidance provided as part of this program to answer questions that may result from these subjects? _____

How long is your program intended to run? _____

Will the books be distributed at once or will they be retained on hand for distribution following an event, such as a hurricane? _____

Is your organization willing to produce a joint press release with a sponsor about the success of this program? Pilot Full Program

How soon do you want to implement this program? _____

Are there any specific companies, agencies, or groups you would like to consider you for sponsorship? _____