


**Greater Cleveland SAFE KIDS/Safe Communities Coalition
2010 Summer Safety
Membership Participation Form**

Community/ Group: _____

Approximate Date(s): _____

All items free of charge/quantities limited/while supplies last

Campaign Materials	Quantity
	<p>Cut-out rentals <input type="checkbox"/> boy <input type="checkbox"/> girl <input type="checkbox"/> both Date _____</p>

Name of sponsoring agency: _____

Contact name: _____

Phone number: _____ E-mail address: _____

Please fax responses to 216-983-1180.

Office Use Only	
Date Filled: _____	Initials: _____
Date Sent/Picked Up: _____	Initials: _____
Activity Report? <input type="checkbox"/> Yes Date: _____	