



Push for Pencils Participant Information

About Your Company or Organization:

Coordinator's Name: _____

Coordinator's Position: _____

Company or Organization Name:

Address: _____

City: _____

State: _____ Zip: _____

Phone: _____ E-mail: _____

Number of Employees: _____

Is this the first time you have participated in Push for Pencils?

Yes
How did you hear about the campaign?

No
How many years has your company or organization participated? _____

Is this the first time you have coordinated the drive? Yes No

Are you interested in volunteer opportunities for your employees?

Yes
 No

Does your company provide volunteer release time for individuals or groups?

Yes
 No

Does your company offer a matching gift program?

Yes
Contact person: _____

Phone: _____ E-mail: _____
 No

About Your Supply Drive:

Who is sponsoring your drive?

Dept/Branch: _____
 Employee group: _____
 Community Relations
 HR
 Other: _____

How many company locations will participate? _____

Start date of drive: _____

End date of drive: _____

Location(s) of drive: Check all that apply.

- North County
- South County
- West County
- Downtown
- Clayton
- Illinois

When do you plan to drop off your donation at KidSmart?

Who will participate in your drive? Check all that apply.

- Employees
- Customers
- Vendors
- Other: _____

What will you collect during your drive?

- Supplies
What is your school supply goal this year? _____
- Financial Donations
What is your financial donation goal this year? _____

Promoting Your Supply Drive:

How many posters do you need? _____

How many CRUNCH cards would you like? _____

How many collection boxes do you need? _____

Will your company host an internal kick off?

Yes
Date of kick off: _____

Kick off location: _____

Describe your kick off: _____

No

Do you have a company Newsletter?

Yes
Contact person: _____

Phone: _____ E-mail: _____

Name of publication: _____

No

May KidSmart include your company name or logo in promotional materials such as posters, media releases and websites?

Yes
 No

Additional Comments: _____

If you have any additional questions please contact Mandi Pollihan at mandi@kidsmartstl.org or 314-291-6211.