

**Due by September 30, 2015**

**CHKD On Tour Request Form**  
September 2015 through June 2016

<b>SCHOOL</b>	
<b>FIRST GRADE LEVEL CHAIR NAME</b>	
<b>EMAIL ADDRESS</b>	
<b>SCHOOL ADDRESS</b>	
<b>PHONE NUMBER</b>	
<b>NUMBER OF FIRST GRADE CLASSES &amp; STUDENTS</b>	Number of 1 <sup>st</sup> grade <b>classes</b> _____ Total number of 1 <sup>st</sup> grade <b>students</b> _____
<b>REQUESTED DATE AND TIME FOR TOUR(S). PLEASE LIST AT LEAST 3 DATE OPTIONS.</b>	1. Date : _____ Time: _____ 2. Date: _____ Time: _____ 3. Date: _____ Time: _____ 4. Date: _____ Time: _____
<b>WOULD YOU LIKE THE BUDDY BRIGADE (THERAPY DOGS) TO VISIT YOUR SCHOOL?</b>	<b>Yes</b> <b>No</b>

**Mail this form to:** CHKD, 601 Children's Lane, Attention: Sam Fabian, Norfolk, VA 23507, or fax to 668-7350 by **September 30, 2015**.

**\*\*We can schedule programs during the month of September.**

If you have any questions, please contact me at 668-7402 or via email at [Sandra.Fabian@chkd.org](mailto:Sandra.Fabian@chkd.org).

Thank you.