



YES, Granny! I want the Help Stop Bullying Now! Tool Kit™ at no cost to me or my school.

Both parts of this form must be completed. Your **Help Stop Bullying Now! Tool Kit™** will be shipped to you in 3 – 5 business days after your sponsor’s check has cleared. And, don’t forget, since you found your own sponsor you’ll receive a \$50 classroom supply check from StoryTime Club.

My name is _____.

I teach _____ grade at

Name of School

Telephone Number (Daytime)

Name of School District

E-mail Address

Street

SHIP TO ADDRESS (if different)

City/State/Zip Code

Street

City/State/Zip Code

Now, please tell Granny how you feel bullying affects children and why you believe Granny’s **Help Stop Bullying Now! Tool Kit™** will benefit your class. (Your first name, last initial, the name of your school along with your response may appear on Granny’s website.)

[Large yellow rectangular area for writing a response]

I FOUND MY OWN SPONSOR FORM

Granny, look at the sponsor(s) I found!

My class will jump to the head of the line and immediately receive the Help Stop Bullying Now! Tool Kit.™

Thank you for the \$50 classroom supply check (for each sponsor I found).

Please tell us about your sponsor.

Name of Sponsor (Group/Individual)

Address of Sponsor

City/State/Zip Code

Contact Person (if different from above)

Payment Method (earmarked exclusively for **YOUR Help Stop Bullying Now! Tool Kit.™** Shipped in 3-5 business days to you/your classroom once the funds have cleared.)

___ check or money order for \$300 enclosed, payable to:

StoryTime Club, Inc
P.O. Box 123
Willow Spring, NC 27592

Good for \$50 classroom supply check

Please tell us about a sponsor you found for another classroom — complete 'Other Sponsored Classroom Form' below so Granny's Tool Kit can be shipped to that teacher.

Name of Sponsor (Group/Individual)

Address of Sponsor

City/State/Zip Code

Contact Person (if different from above)

Payment Method (earmarked exclusively for **additional Help Stop Bullying Now! Tool Kit.™** Shipped in 3-5 business days to the other classroom once the funds have cleared.)

___ check or money order for \$300 enclosed, payable to:

StoryTime Club, Inc
P.O. Box 123
Willow Spring, NC 27592

Good for \$50 classroom supply check

OTHER SPONSORED CLASSROOM FORM

Oh, Granny, I found a sponsor for this classroom, too!

**So, now this class will jump to the head of the line and immediately receive the
Help Stop Bullying Now! Tool Kit.™**

And my classroom gets the \$50 classroom supply check for this sponsored class as well.

Sponsored teacher #2: _____

teaches _____ grade at

Name of School

Telephone Number (Daytime)

Name of School District

E-mail Address

Street

SHIP TO ADDRESS (if different)

City/State/Zip Code

Street

Sponsored by (as noted above)

City/State/Zip Code