

Creative Kidstuff Gift Card Give Back Application

Your Name: _____ Date: _____

Your Phone #: _____ E-mail: _____

About Your Organization

1. Name of you organization: _____
2. Brief Description of you organization and mission state. (Creative Kidstuff will use this information on our company's web site along with a logo you provide)

3. Organization's Web Site: _____

4. Contact Information

Name: _____

Address: _____

E-mail Address _____

Phone Number _____

Final Instructions

- Please mail this form:

Creative Kidstuff
Attn. Sue Katsiotis
3939 E 46th Street
Minneapolis MN, 55406

- Please send your organizations logo to kbornhofft@creativekidstuff.com please ensure your logo is high resolution and on jpeg or eps file.