

# NEW

# Red Ribbon Tool Kit

Kansas Family Partnership, Inc. and the Red Ribbon State Planning Committee have made celebrating Red Ribbon Week easy with the new Tool Kit, a bag filled with educational supplies. The Tool Kit will prepare Red Ribbon Coordinators in schools and communities with the necessary materials to celebrate Red Ribbon Week. The national campaign, Red Ribbon Week, promotes drug-free behavior and is celebrated October 23-31 annually.



Each Tool Kit includes enough materials to accommodate 25 students. Materials include a jump drive with materials that can be downloaded for duplication, a Red Ribbon Coordinator booklet, age appropriate brochures and/or coloring books, awareness bracelets, mechanical pencils, "Must Be 21" cards, red ribbons and double-sided tape, pledge cards and a DVD PowerPoint from the Kansas Traffic Safety Resource Office entitled "Ride Like A Friend...Drive Like You Care." A folder will also be included with additional information.

The Tool Kit is available for purchase, for \$25 each. For additional information and to order, contact Maria Torrez Anderson, Kansas Red Ribbon State Coordinator. Contact Maria at: [mtanderson@kansasfamily.com](mailto:mtanderson@kansasfamily.com) or (800) 206-7231.



## Red Ribbon Tool Kit Order Form

### TO PLACE YOUR ORDER:

- 1. Mail to:** Kansas Family Partnership  
5942 SW 29th St.  
Topeka, KS 66614
- 2. Call:** Toll Free (800) 206-7231 or (785) 266-6161  
8 a.m. - 5 p.m., Monday – Thursday  
8 a.m. – 4:30 p.m., Friday
- 3. Email:** [mtanderson@kansasfamily.com](mailto:mtanderson@kansasfamily.com)
- 4. Fax:** (785) 266-6149
- All orders must be paid in full prior to delivery.
- Allow 10-14 days for processing.

Brochures – Select one age level

- Elementary  
 Middle School  
 High School

(One age level per Kit. For additional brochures, call RADAR at: (800) 206-7231

Total number of Kits \_\_\_\_\_ x \$25.00 = \_\_\_\_\_

Shipping Charge:

Number of Kits \_\_\_\_\_ x \$5.00 = \_\_\_\_\_

**Order Total** \_\_\_\_\_

**Payment Method:** Cash, Check or Money Order

Make checks or money orders payable to Kansas Family Partnership, Inc.

**Please type or print**

**Ship to: (Orders cannot be delivered to PO Boxes)**

Company/School Name \_\_\_\_\_

Attention: \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Fax ( ) \_\_\_\_\_

e-mail \_\_\_\_\_