

***Lessons In A Lunch Box: Healthy Teeth Essentials & Facts About Snacks®***

**Final 2011-2012 Program Registration Form**

Dental School

Elementary School

Name	_____	_____
Address	_____	_____
Phone Number	_____	_____
Dean/Principal	_____	_____
Website	_____	_____
Contact Person(s)	_____	_____
	_____	_____
Email Address	_____	_____
Number of Dental/K-3 Students	_____	_____
	_____	_____
FedEx or UPS Account#	_____	

**The Children's Oral Health Institute** will provide approximately 240 lunch boxes to the dental school listed above to present to the elementary school registered on this form. The lunch boxes are given to the children in conjunction with the dental hygiene presentation you will offer on proper brushing, flossing and good dietary choices. Lunch boxes will be shipped in ten (10) cases of 24 to the school you have selected and listed on this form. We only require that you assume the responsibility for the shipping cost. Please include your FedEx or UPS account number on this form or in your email communication to Dr. Winifred J. Booker. Checks can also be made payable to The Children's Oral Health Institute. The mailing address is 9199 Reisterstown Road, Suite 203A, Owings Mills, Maryland, 21117. You will be notified of the cost. Please email the completed form to [wbohi@aol.com](mailto:wbohi@aol.com). This form can be emailed or faxed without a cover to (410) 356-8574).