

Prevent Child Abuse Illinois Literature Request Form

Prevent Child Abuse Illinois brochures and posters are available to agencies, professionals and families throughout Illinois at no cost except for shipping and handling. You may order up to 200 brochures per title per quarter. Accommodations can be made for larger quantities by calling the office at 217-522-1129.

Please print clearly:

Name	Organization Name	
Address	County	
City	State	Zip
Phone	Fax	
Email Address	Date of Order	Date Order Filled

Prevent Child Abuse Illinois Professional Development Brochures:	Quantity	Quantity
200 brochures FREE per quarter per title (shipping and handling charges will apply).	English	Spanish

<u>Get Water Wise...Supervise!</u>	_____	_____
Safety tips to help parents better protect children from water-related tragedies. Each order will Include 2 . 11+ x 14+Posters		

<u>Shaking a Baby Can Be Deadly</u>	_____	_____
An overview on Shaken Baby Syndrome and tips to help caregivers to console a crying baby. Each order will Include 2 . 8 ½+ x 16 ½+Posters		

<u>The Effects of Domestic Violence on Children</u>	_____	_____
Understanding the cycle of violence, effects on children, warning signs and basic skills to assist with children who have been exposed to Domestic Violence.		

<u>The Effects of Methamphetamine on Children</u>	_____	_____
Provides facts on the effects of Methamphetamine, what it is and how children are affected. Each order will Include 2 . 17+x 11+Posters		

<u>How Well Do You Know Your Lover? Children in Danger</u>	_____	_____
A checklist and tips to identify how relationships can impact the safety of children.		

<u>Today's Children, Tomorrow's Future</u>	_____	not available
What everyone can do to Prevent and Respond to Child Abuse		

Shipping and Handling Charges

Number of Brochures

0 to 50 – No Charge	301 to 600 - \$9.00	901 to 1200 - \$15.00	1501 to 1800 - \$21.00
51 to 300 - \$6.00	601 to 900 - \$12.00	1201 to 1500 - \$18.00	1801 and above - \$24.00

METHOD OF PAYMENT:

Total Enclosed: \$ _____ Check/Money Order Enclosed Send Invoice Visa MasterCard

Card #	Exp. Date
Name on Card (Please Print)	Signature of Card Holder

Please mail or fax to:

Prevent Child Abuse Illinois • 528 So. 5th Street, Suite 211 • Springfield, IL 62701 •
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www.preventchildabuseillinois.org