

Safety Fair 2008 – 2009 Ride and Roll Questionnaire

Name of School:

Physical Address:

City:

Zip:

Principal Name:

Phone Number:

Fax Number:

Total Number of Students in Attendance - Please identify number of Students in each grade.

K – 3	1st	4th
K – 4	2nd	5th
K – 5	3rd	6th

We are required to work with the principal (not staff). Parents will receive a letter with information about safety prevention, the importance of having their children use the helmets, care of the helmets, and identification of the Mississippi Department of Rehabilitation Services SCI/TBI Trust Fund.

The Ride and Roll educational program will be presented to the children, the children who participate in the education workshop will be fitted with a helmet. This will take place on the date set up by the Brain Injury Association staff and the school Principal.

The Ride and Roll Presentation will be broken down into two groups for schools that have 300 or more students in attendance.

We request a minimum of 12 volunteers to help fit the free multi – sport helmets. This helps the children to be fitted in a timely manner.

The schools are set up on a first come first serve basis. Time of the program for the Ride and Roll injury and prevention is 9:00 a.m. at each school.

Materials needed from the school for the Ride and Roll Presentation include: PA System.

List two dates for Ride and Roll Safety Fair:

Principal Signature (required):

For more information call Dana Pierce, Associate Executive Director at 601-981-1021 or toll free at 1-800-641-6442. Please return directions to your school with this questionnaire.