

Your Family's *Smart* Solution for 40 Years 410-742-1188

Free Multi-Vitamins for Children Enrollment Form

Today's Date//	
Parent's Name*	Date of Birth*//
Street Address*	
City	_ State Zip
Phone* Home	Cell
Email	
Children in Home (to be enrolled)*	
Name	Date of Birth// Grade
Parent/Guardian signature* _	
*required information	

We must have valid contact information so that we may reach you in the unlikely event of a product recall. We will never sell or share your information to a third party. We may contact you occasionally with information on special event and promotions. If you prefer not to be contacted, please indicate that preference by initialing here _____