



Brain Injury Association of Florida Inc.  
201 East Sample Road  
Pompano Beach, FL 33064  
Phone: 954-786-2401  
Fax: 954-786-2437  
Helpline: 800-992-3442

*A Chartered State Affiliate of the Brain Injury Association, Inc., Washington, DC*

### **I.M. BRAINY<sup>®</sup> REQUEST FORM**

Please fill out the information below, sign and submit form at least 2 weeks prior to required date.

Date Requested: \_\_\_/\_\_\_/\_\_\_ Date I.M. Brainy<sup>®</sup> needed: \_\_\_/\_\_\_/\_\_\_

Responsible Person's Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Organization Requesting: \_\_\_\_\_

Organization Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Ship-To Address (if different from above): \_\_\_\_\_

Ship to Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Name of Event: \_\_\_\_\_

Location of Event: \_\_\_\_\_

# People Attending: \_\_\_\_\_ Number of surveys to be completed & returned: \_\_\_\_\_

(PLEASE CHECK ONE) I will  will not  need the I.M. Brainy<sup>®</sup> curriculum sent to me. (Note that this material can be downloaded and printed off the [www.biaf.org](http://www.biaf.org) website.)

**Acceptance: I agree to be the responsible party and abide by the following rules when using the I.M. Brainy<sup>®</sup> Puppet:**

1. Upon receipt, **I will inspect I.M. Brainy<sup>®</sup>** and immediately report any damages to Brain Injury Association of Florida Inc. (BIAF). I will be responsible for any damages that occur during my possession.
2. I agree to return I.M. Brainy<sup>®</sup> puppet back, **postage paid by me or my company, via UPS or FEDEX** in good working condition. (We suggest you keep the tracking number in case there is a shipping issue.)
3. The I.M. Brainy<sup>®</sup> puppet should be shipped **within 48 hours of completion of use**, to the following address:

Gilmore Associates, Inc.  
ATTN: BIAF I.M. Brainy<sup>®</sup> Puppet  
6851 SW 21<sup>st</sup> Court, Bay 6  
Davie, FL 33317

4. I agree to return all surveys requested from Brain injury Association of FL Inc. after presentation completion. Return the surveys in the box, or fax them to Amy Barrow at 954-786-7318, or by email at [a\\_barrow@biaf.org](mailto:a_barrow@biaf.org), or by mail to:

Amy Barrow  
Brain Injury Association of FL Inc.  
201 E. Sample Road  
Pompano Beach, FL 33064

**Signature:**

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**Printed Name and Title:**

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**Date:**

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***Thank you for your interest and support of the I.M. Brainy<sup>®</sup> Prevention Program! ☺***