



“What Makes Your Family Strong?” Essay/Drawing SUBMIT FORM

Classroom Teacher’s Name: _____

School: _____

Teacher E-mail: _____

Date: _____

Number of students participating from your class: _____

(This number will be used to print blank participation certificates that you complete with student names.)

Optional: If you email an excel document to director@upnorthchildabusecouncil.org with the first name and last name of each student, each certificate will be personalized for you.)

Please complete form, group with essays/drawings,
and mail in one package to:

CAPE Council, P.O. Box 414, Petoskey, MI 49770