



Hope for children and families

## KCA Chapter Registration Form

We are so thrilled you have decided to start a KCA Chapter in your community! Before you begin, please fill out this Chapter Registration Form and send to the KCA office. This helps us keep track of all of our Chapters and stay in touch if you need any advice or materials. Make sure you've read through our KCA Community Guidebook to make sure being a Chapter Leader is something you are willing to do.

Send this completed form by mail, e-mail, or fax to:

Keep a Child Alive  
45 Main Street, Suite 720  
Brooklyn, NY 11201  
Attn: Dianna Sinni

e-mail: [info@keepachildalive.org](mailto:info@keepachildalive.org)  
fax: (718)-965-1158

**CHAPTER NAME:** \_\_\_\_\_

**CHAPTER LEADER NAME:** \_\_\_\_\_

**PLEASE CHECK ONE:** High School \_\_\_\_\_ College \_\_\_\_\_ Other (specify) \_\_\_\_\_

**CHAPTER ADDRESS:** *(school, personal, or wherever is best to reach your chapter)*

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**LEADER'S PHONE NUMBER:** \_\_\_\_\_

**LEADER or CHAPTER E-MAIL:** \_\_\_\_\_

**YEAR & SEMESTER OF LEADER GRADUATION:** *(if applicable)* \_\_\_\_\_

**TERM LENGTH OF LEADER:** \_\_\_\_\_

Once this form is received, you will receive a confirmation from the KCA office.  
*Questions? Call the KCA office (718)-965-1111*