

Be more...be a KACV Kid! Please fill out and mail to:

KACV-TV, P.O.Box 447, Amarillo, TX 79178

Adult Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Child Name 1 \_\_\_\_\_ Age \_\_\_\_\_ Birthday \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Favorite Character \_\_\_\_\_ Shirt size: (Child) S M L (Adult) S M L

Child Name 2 \_\_\_\_\_ Age \_\_\_\_\_ Birthday \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Favorite Character \_\_\_\_\_ Shirt size: (Child) S M L (Adult) S M L

Child Name 3 \_\_\_\_\_ Age \_\_\_\_\_ Birthday \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Favorite Character \_\_\_\_\_ Shirt size: (Child) S M L (Adult) S M L

Child's address if different from above:

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

# of children joining: \_\_\_\_\_ X \$25.00 = \_\_\_\_\_ Total Amount

We accept cash, check, money order or credit card.

Circle One: Visa MasterCard Discover American Express

Card Number: \_\_\_\_\_

Exp. Date: \_\_\_\_\_

Signature: \_\_\_\_\_



[www.kacv.org](http://www.kacv.org)