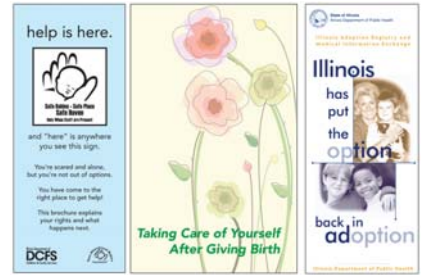


# REQUEST FORM FOR NEWBORN INFANT PROTECTION ACT POSTERS AND BROCHURES

**Information Packet for individuals relinquishing infants at Safe Havens**  
 Three-brochure packet includes: Safe Haven Law information and optional registration form (CFS 1050-74-1), post-partum health issues (CFS 1050-74-2) and Illinois Adoption Registry (CFS 1050-74-3) brochures

English	5	25	50	Other quantity _____
Spanish	5	25	50	Other quantity _____
Polish	5	25	50	Other quantity _____



**No Shame, No Blame, No Names poster (11 x 17)**

English: \_\_\_\_\_  
 Spanish: \_\_\_\_\_  
 Polish: \_\_\_\_\_



**NEW 2017 Don't Panic poster (8½ x 11)**

English: \_\_\_\_\_  
 Spanish: \_\_\_\_\_  
 Polish: \_\_\_\_\_



**Help is Here poster (8½ x 11)**

English: \_\_\_\_\_  
 Spanish: \_\_\_\_\_  
 Polish: \_\_\_\_\_



**No Shame, No Blame, No Names brochure (CFS 1050-74)**

English: 50 100 200 Other \_\_\_\_\_  
 Spanish: 50 100 200 Other \_\_\_\_\_  
 Polish: 50 100 200 Other \_\_\_\_\_



**Don't Panic poster (8½ x 11)**

English: \_\_\_\_\_  
 Spanish: \_\_\_\_\_  
 Polish: \_\_\_\_\_



**Quick Reference Card**

English: 50 100 200 Other \_\_\_\_\_  
 Spanish: 50 100 200 Other \_\_\_\_\_  
 Polish: 50 100 200 Other \_\_\_\_\_

School Name: \_\_\_\_\_

Principal's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Approximate number of students enrolled: \_\_\_\_\_

**Three ways to order:**

Fax to Illinois DCFS, 217-785-8068 • Scan and email to [info@saveabandonedbabies.org](mailto:info@saveabandonedbabies.org)

Mail to Save Abandoned Babies Foundation, 55 E. Erie, #2905, Chicago, IL 60611

**For more information, visit [www.saveabandonedbabies.org](http://www.saveabandonedbabies.org) or [www.DCFS.illinois.gov](http://www.DCFS.illinois.gov)**