



Cuddle My Kids

Providing free support services
for families with cancer

Backpack Program

Welcome to the Cuddle My Kids Backpack Program. This program allows Cuddle My Kids to provide backpacks filled with creative materials to organizations that may distribute them to families affected by cancer. In order to continue to provide quality no-cost programs, we ask that you provide the following information:

Cuddle My Kids has provided _____ backpacks to the following organization: _____

Applicant Name: _____

Organization Name: _____

Address: _____

E-mail: _____

This no-cost program has been provided to the above organization at the total value of: _____

Date of Application: _____

How will this backpack program improve the patient support services you provide?

How will this backpack program provide support to the children whom have a relative undergoing cancer treatment?

How will this program provide improved quality of life for the cancer patient during their treatment?



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What will this backpack program provide for the families facing a cancer diagnosis?

How does the backpack program complement your existing cancer support programs?

How will this backpack program impact the future of your support services offered to patients and their families?

Do you have any additional thoughts on the benefit of this program?

Please remit this form to:

Cuddle My Kids, Inc.
PO Box 256
Westtown, Pa 19395

Please contact Cuddle My Kids with any questions:
484-301-3047 / info@cuddlemykids.org

Thank you for your time and efforts in helping us support families with cancer.