

Mail to:
Amazing Kids!
5267 Warner Ave. Suite 235
Huntington Beach, CA 92649
Phone: 714-996-2123
Fax: 714-364-0420



Amazing Kids! PenPal Program - Teacher Agreement

I, _____
Teacher's First and Last Name (*please print*)

a _____ teacher at _____,
Grade Level or Type of Class Name of School

hereby give permission for my students to participate in the Amazing Kids! PenPal program. I understand that they will participate in this program with another child of similar age/grade level, and same gender, selected by Amazing Kids! This selection will be based on the criteria which I, the teacher, indicate on the registration form on the Amazing Kids! website at www.amazing-kids.org.

By signing this agreement, I agree to provide Amazing Kids! with my current contact information, including a contact phone number, current email and mailing address. I understand that the information to be given to my student's pen pal and parent(s), teacher, or group leader, is solely for the purposes of the PenPal program, and that Amazing Kids! will not share our personal information with anyone else. I hereby acknowledge that once the match has been made by Amazing Kids!, it is solely my responsibility as the teacher, and not the Amazing Kids! organization, to oversee the pen pal correspondence between my student and her/his pen pal. I understand that Amazing Kids! makes no guarantees in the matching process, but will consider requests for an alternate pen pal should either my student or myself be unsatisfied with the original pen pal selection.

Teacher's Name: _____

Teacher's Signature: _____ Date: _____

Name of School: _____ Grade/Student Age(s): _____

City & State (if outside U.S., Country): _____