

ORDER FORM

“Children of Incarcerated Parents: A Bill of Rights”

Name _____

Street Address _____

City _____ State _____ Zip Code _____

Email Address _____

(to contact you in case of a shipping problem)

Number of copies requested (\$2 per copy, shipping included) _____

A 12-minute video about the Bill of Rights is available for \$14, shipping included.

Number of videos requested (please circle one: VHS or DVD) _____

Amount enclosed \$ _____

Make check payable to Friends Outside.

Mail order to
SFCIPP
PO Box 293
1563 Solano Avenue
Berkeley CA 94707