

♡ Brave BOXES

EMPOWERING PATIENTS!

More tools to prepare kids of all ages, and their families, to battle the difficult medical challenge of Type 1 diabetes in their lives.

When it comes to your patients, we know you care about their well-being and want the very best health outcome. With your heavy patient load, tight schedules and not having every resource you need, sometimes you can't always give them everything they need. But, we have an amazing resource, and want to help you, help them.

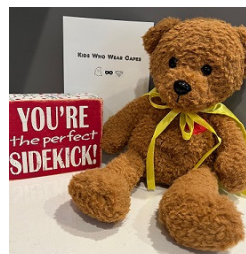
When it comes to Type 1 diabetes management, four things matter most:

- ♡ A GREAT MEDICAL TEAM
 - ♡ KNOWLEDGE IS POWER
 - ♡ MINDSET MATTERS, AND IS A TOOL
 - ♡ COURAGE & STRENGTH ARE ESSENTIAL AND COME FROM WITHIN
- Without these components, Type 1 diabetes is as dangerous as a lack of insulin.. It is proven that physical and emotional health are connected and that supporting one, supports the other.

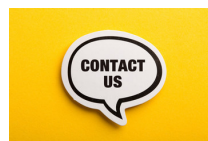
Our support begins with the packaging. A fun box, characterizing the patient as the newest Superhero in training, helps starts them down a positive path in their new journey. Inside, is the help of their new, huggable, bear friend, Maxwell, their trusty new sidekick, along with our signature approach book 'Kids Who Wear Capes' that lets kids (*big and small*) know that everything is going to be okay. Maxwell teaches about becoming brave and leads them to their superpower of courage. Helpful books, educational materials, useful items for their hospital stay, and important, practical & essential tools they will need when they leave the hospital are part of the package; In addition, touches of love, support, and fun are added. A greeting card from other kids with Type 1 diabetes lets families know that they are not alone. To complete the care package is another signature approach booklet, *'The Uninvited Stranger: Type 1 diabetes: The Emotional Side.'* A gift for parents, written by our founder, whose child has Type 1 diabetes, is a practical guide for coping, understanding, and strength. The Uninvited Stranger also includes organizational tips, a helpful back to school plan, and contains precious resources.



EVERY
SUPERHERO
NEEDS A
SIDEKICK



We partner with the diabetes medical teams at children's hospitals who get Brave Boxes into the hands of newly diagnosed Type 1 patients during their hospital stay. Brave Boxes are a shippable version of our Crate Full of Courage program that for over 15 years has been successfully putting smiles on faces at an incredibly difficult time and providing tangible tools to face the psychological demands of Type 1.



Send us an email (courage@kidswithcourage.org), or give us a call (816.547.8376) to find out how together we can differentiate your outstanding care to better serve your patients and families leading them to improved thoughts, actions and outcomes, helping families grow stronger in body, mind, and spirit.

"We cannot change the fact that these kids will have to live their lives battling every day, but we can impact the way they see their world."



IMPROVE HEALTH OUTCOMES FOR YOUR PATIENTS WITH TYPE 1 DIABETES



Brave BOXES



Preparing kids of all ages, and their families, to battle the difficult medical challenge of Type 1 diabetes

Making Brave Boxes part of your medical team's treatment plan will provide kids and families ...

- Helpful Tools
- Practical Needs
- Education
- Resources
- Comfort
- Support
- Fun Stuff
- Direction

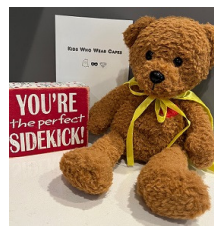
Tangible Tools to face the psychological demands of Type 1

Guaranteed... to bring smiles to faces at an incredibly difficult time, and lets children and families know that they're not alone

Together... leading patients and families to improved thoughts, actions, and outcomes, helping families grow stronger in body, mind, and spirit



EVERY
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Designed to empower, helping kids become brave!

"We cannot change the fact that these kids will have to live their lives battling every day, but we can impact the way they see their world. Those battling Type 1 diabetes need all the courage, strength and perseverance possible." Kids With Courage



MEDICAL TEAM PARTNERSHIP

Our patients need the amazing support of **Brave Boxes**,
and we want to make them part of our treatment plan!

Check one: **WE'LL BE IN TOUCH SOON** **PLEASE REACH OUT TO US**

Hospital/Medical Team: _____	
Contact: _____	
Address: _____	City, State and Zip: _____
Phone: () _____	E-mail: _____
Partnership Options:	
<input type="checkbox"/> INFORMATIONAL FLYERS For medical team to give to families. Families will know we're here, and can order a Brave Box directly. Flyer Quantity: _____ * (OR, YOU CAN DOWNLOAD)	No Charge
<input type="checkbox"/> BRAVE BOXES We want to make Brave Boxes part of our treatment plan. Send us _____ (QTY) (Value \$300) Wholesale price. Includes shipping.	\$125 each
<input type="checkbox"/> CUSTOM BRAVE BOXES We want to make Brave Boxes part of our treatment plan, but our budget doesn't allow for complete package. We would like to customize a box to fit our budget.	REACH OUT. WE CAN CUSTOM MAKE FOR AS LITTLE AS \$35
<input type="checkbox"/> NOMINATE ONE OF YOUR TYPE 1 CHAMPION/SUPERHERO/WARRIOR PATIENTS With this option, you are nominating someone to receive a Brave Box Free of charge. They will be added to our Kids With Courage waitlist. When someone Sponsors a Brave Box, we will ship them one. Every person nominated receives a Brave Box (or critical components of) no matter what, but it will be dependent on the availability of a sponsor. Ship to name and complete address: _____	No Charge
<input type="checkbox"/> PURCHASE/SPONSOR A BRAVE BOX TO DONATE TO A NEWLY DIAGNOSED CHILD/FAMILY, AND KWC WILL SHIP TO THEM (Value \$300) With this option, it can be sent right away, and you have the opportunity to make your gift extra special by including your own personal message. Price includes shipping cost. Ship to name and complete address: _____ Write person message here: _____	\$ 125
TOTAL \$	
Payment:	
<input type="checkbox"/> Enclosed is check for \$ _____ for purchase as indicated above. Payable to: Kids With Courage	
<input type="checkbox"/> Please charge my credit card in the amount of \$ _____ for purchase. Visa, MasterCard, Discover, American Express (CIRCLE ONE) Credit Card No.: _____ Expiration Date: _____ Card Holder Name: _____ Signature: _____	
<input type="checkbox"/> I will make an online donation thru your website for the amount shown on this request form, and I will email you this information.	

QUESTIONS? Phone: 816.547.8376 Email: courage@kidswithcourage.org Tax ID #: 20-5182362 www.KIDSWITHCOURAGE.org

Please complete this form and return it by mail or e-mail to:

KIDS WITH COURAGE FOUNDATION • PO BOX 7034 • LEE'S SUMMIT, MO 64064