



The Great Kindness Challenge®

One Week. One Checklist. Infinite Happiness.

Bundle of Classroom Kindness Opportunity Drawing Winner Form

Please complete the below information and email it to info@greatkindnesschallenge.org by Friday, February 1st. Thank you so much!

Winner's Information

Individual's Name: _____

School Name: _____

Teacher Name: _____

Room Number: _____

Winning School Information

Street Address: _____

City: _____

State: _____

Zip Code: _____

School's Phone Number: _____

Your Designated Rubio's Information

Rubio's Location: _____

Rubio's GKC Kind Captain Information

Your Name: _____

Your Email Address: _____

Your Cell Phone Number (in case we have a question about the winner): _____

Witness Information:

Witness Name: _____

By signing below, I give my word that we randomly and honestly chose one winner from the Rubio's Opportunity Drawing box from my designated Rubio's location.

Rubio's GKC Kind Captain Signature & Date

Witness Signature & Date
