



Our Purpose

To support foster and adoptive families, relatives or caregivers who share parenting with the birth family while seeking to find permanence, safety, and stability for the child.

These individuals are willing to provide a permanent connection for the child as the child reunifies with the birth family. They play an active role in linking the child to their past as well as guiding their future.



2009-2010 Board of Directors

President:	Julie Schoemehl 816-729-7513 julie13022@yahoo.com
Vice President:	Stacey G. Ulrich 785-822-6972 staceyulrich@sbcglobal.net
Secretary:	Nancy Duling 316-773-4385 gduling@cox.net
Treasurer:	Sandra Hiller, LMSW 620-628-4071 sandra-hiller@fhrd.net
Region 1 VP:	Richard Basham 620-336-3410 rbasham404@yahoo.com
Region 2 VP:	Vacant
Region 3 VP:	Carol & Dennis Finch
Region 4 VP:	Dianne Briscoe 785-658-7385 dbriscoe85@yahoo.com
Region 5 VP:	Dana Decker 316-522-7136 danad5@cox.net
Committee Chairs:	Advocacy/Public Policy Dennis Finch
	Resource Development Nancy Duling

Rev. 7/10

Kansas Foster and Adoptive Parent Association



Our Mission

To empower, support and advocate for Kansas families by promoting safety, permanency, and well-being of our children.

Membership Information

www.KFAPA.org

Benefits from Membership in KFAPA:

- On-going trainings at local and state level
- Annual conference
- Development of a statewide resource guide for foster parents
- Networking opportunities with other foster (resource) families, adoptive families, and relative caregivers
- Trained volunteers to advocate on your behalf at local, state and national levels
- Opportunity for all foster (resource) families, adoptive families and relative caregivers to be actively involved in an association by serving on committees and/or on the Executive Board
- Working to instigate changes by alertness to legislation affecting the child welfare system
- Quarterly newsletter



Membership Options

- **INDIVIDUAL**— available to all licensed foster (resource) families, adoptive families, and relative caregivers for \$10.00/year
- **CORPORATE**— available to all child welfare agencies for \$100.00/year
- **PROFESSIONAL**— \$10.00/year
- **LOCAL AFFILIATE**— \$25.00/year
- **LIFETIME**— \$1000.00

Membership year runs from July 1 to June 30.

Membership Application

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Phone: _____

E-Mail: _____

Check all that apply:

- Foster (Resource) Parent
- Adoptive Parent
- Relative/Kinship Caregiver
- Informal Care Provider
- Agency _____
- Other _____

Are you interested in holding a Board position or serving on a KFAPA committee? Yes No

I would like to make a tax deductible contribution to KFAPA, a non-profit 501(c)(3) organization, in the amount of: _____

Membership application and appropriate dues should be sent to:

KFAPA
PO Box 273
Canton, KS 67428