

Contact List

Planning Committee:

| Contact type | Name | Cell phone # | Office phone # | Email |
|------------------------------|------|--------------|----------------|-------|
| Hospital management | | | | |
| NICU doctor/ staff member | | | | |
| Hospital media relations | | | | |
| Parent of NICU graduate | | | | |

External Contacts:

| Contact type | Name | Cell phone # | Office phone # | Email |
|--------------------------------|------|--------------|----------------|-------|
| Food vendor | | | | |
| Food vendor | | | | |
| Activities vendor | | | | |
| Activities vendor | | | | |
| Game vendor | | | | |
| Game vendor | | | | |
| Local media (ABC, CBS, NBC) | | | | |
| Parks and Recreation dept. | | | | |