



Please complete both sides of this application, to avoid delays in processing.
Applications MUST be received by December 14, 2020 at 2:00 pm

I. Identifying Information

CHILD'S NAME: _____

GENDER: MALE FEMALE AGE: _____

SCHOOL: _____ GRADE: _____ ETHNICITY: _____

HEIGHT: _____ WEIGHT: _____

PARENT'S NAME: _____

ADDRESS: _____ CITY: _____ STATE: _____

PRIMARY TELEPHONE: _____ SECONDARY TELEPHONE: _____

Please note that we will attempt the number on the application three times before discarding. Please make sure the numbers listed are in working order.

II. Clothing

IS THERE A NEED FOR SCHOOL UNIFORMS? YES NO

PANT SIZE: _____ SHIRT SIZE: _____ SHOE SIZE: _____ UNDERGARMENT SIZE: _____

SOCKS SIZE: _____ BELT SIZE: _____

DOES YOUR CHILD NEED A WINTER COAT? YES NO

IS THERE A NEED FOR SPECIFIC HOUSEHOLD ITEMS? IF YES, PLEASE DESCRIBE:

III Toys & Interests

PLEASE LIST THREE (3) AREAS OR HOBBIES YOUR CHILD IS INVOLVED IN:

- 1.
- 2.
- 3.

PLEASE LIST TWO (2) OF THEIR FAVORITE TELEVISION SHOWS, MOVIES OR MUSIC ARTISTS:

- 1.
- 2.

PLEASE LIST ANY EDUCATION NEEDS THE CHILD MAY HAVE:

- 1.
- 2.
- 3.

PLEASE LIST FIVE (5) ITEMS THEY WOULD LIKE:

- 1.
- 2.
- 3.
- 4.
- 5.



NAME OF ASSIGNED GUARDIAN ANGEL: _____
GUARDIAN ANGEL'S PHONE NUMBER: _____
GUARDIAN ANGEL'S ADDRESS: _____
DATE ASSIGNED: _____
ASSIGNER'S NAME: _____ PHONE NUMBER: _____

DATE RECEIVED: _____ NUMBER OF ITEMS RECEIVED: _____ WRAPPED: _____
GUARDIAN ANGEL'S SIGNATURE: _____
RECEIVER'S NAME: _____ PHONE NUMBER: _____