

Project Concern 2016 Holiday Assistance Sign-up

Pick-up date and time: Sat. Dec. 17th, 9:00am - noon Patron Initials: _____.
By initialing here, I agree to pick up the gifts during the designated time. I understand that I will not be allowed to participate next year if I fail to attend the pick-up event.

Please list only 1 to 3 items for each child **17 or under**. Each gift request must cost **\$25 or less**.
List clothing or footwear size if requested. No gift cards for children under 13 years old.
Requests must be in by Friday, November 18th

Head of Household: _____
Last Name First Name

Address Phone Number or E-mail

Child's First Name: _____ **Age** _____ **Sex** _____ **Shoe size** _____
Clothing size: (*circle or write in size*) **Girl's** S M L XL _____ **Misses** S M L XL _____ **Women's** S M L XL _____
Infant or Toddler (*circle one*) - *write in size* _____ **Boy's** S M L XL _____ **Men's** S M L XL _____
Desired Item/s: _____

Child's First Name: _____ **Age** _____ **Sex** _____ **Shoe size** _____
Clothing size: (*circle or write in size*) **Girl's** S M L XL _____ **Misses** S M L XL _____ **Women's** S M L XL _____
Infant or Toddler (*circle one*) - *write in size* _____ **Boy's** S M L XL _____ **Men's** S M L XL _____
Desired Item/s: _____

Child's First Name: _____ **Age** _____ **Sex** _____ **Shoe size** _____
Clothing size: (*circle or write in size*) **Girl's** S M L XL _____ **Misses** S M L XL _____ **Women's** S M L XL _____
Infant or Toddler (*circle one*) - *write in size* _____ **Boy's** S M L XL _____ **Men's** S M L XL _____
Desired Item/s: _____

Child's First Name: _____ **Age** _____ **Sex** _____ **Shoe size** _____
Clothing size: (*circle or write in size*) **Girl's** S M L XL _____ **Misses** S M L XL _____ **Women's** S M L XL _____
Infant or Toddler (*circle one*) - *write in size* _____ **Boy's** S M L XL _____ **Men's** S M L XL _____
Desired Item/s: _____