

ZIMMERMAN NEIGHBORS HELPING NEIGHBORS 2011 APPLICATION FORM

For Office Use Only: # _____

Name: _____ Spouse/Other: _____
(Print Name) (Print Name)

Address: _____ Phone: _____
(Street or P.O. Box) (City/Zip Code)

School(s) children attend: _____ # Adults living in home: _____
Address verification is required

***Please list your children below, along with their greatest clothing and personal care needs (i.e. shampoo, soap, toothpaste, deodorant, etc.). Please be as specific as possible, including sizes for each item. Toys may be available.**

(children age 18 must still be in high school)

Boy's Names	Age 0-18	Clothing &/or Personal Care Needs (winter gear, shirts, shoes/boots, pants)	Size
First:			
Last:			
First:			
Last:			
First:			
Last:			
First:			
Last:			

(use additional sheets if necessary)

Girl's Names	Age 0-18	Clothing &/or Personal Care Needs (winter gear, shirts, shoes/boots, pants)	Size
First:			
Last:			
First:			
Last:			
First:			
Last:			
First:			
Last:			

***Release of Information/Signature _____ (*REQUIRED)** Your signature will be your permission to give and receive information about you with other agencies, local churches, schools, civic organizations, etc., who may be sponsoring Holiday projects. You may not participate in more than one Holiday program.

RETURN TO Zimmerman Fire Station (place in drop box) BY NOVEMBER 10, 2011