Dear Participant:

The holiday season will be here soon and each year we are asked to supply the names of families in need to local organizations and individuals. These organizations and individuals give food, clothing and toys with the desire that all Menard County residents, especially the children, will have a Merry Christmas, so please limit your requests to **BASIC** necessities. The application below is utilized to gather information regarding clothing sizes and age/gender appropriate toys. Please do not list special toy requests.

If you are inter Friday, Octobe		referred, plea	se complet	e the application in its ent	rety, sign your name and return it to	the below listed office no later	
rriday, Octobe	. 31, 2017		LIMIT ONE	APPLICATION PER HOUSE	HOLD/PARENT/GUARDIAN		
NAME:			ADDRESS:			CITY:	
PHONE:	EMAIL:				# IN HOUSEHOLD:		
					-		
	OSE CHILDREN RESIDING IN Y				Signature s, etc.	Date	
	s age 12. Clothing: Cut-off	-					
Office Use:	CHILDREN'S NAMES	GENDER	AGE	CLOTHING SIZES (please	indicate infant, toddler, boys, girls,	juniors, misses, womens, mens, etc.)	
				-			
							•
PLEASE LIST AI	NY ADDITIONAL CHILDREN B	ETWEEN THE	AGES OF 1	6 - 18 RESIDING IN YOUR H	OUSEHOLD FULLTIN FULL-TIME WHO	ARE CURRENTLY ENROLLED IN SCHOOL.	
Office Use:	CHILDREN'S NAMES	GENDER	AGE				
					perdiatana sa		
					5		
Please return	this form to:	Menard Co	ounty Housi	ng Authority	CAMERRY		

P.O. Box 168

Petersburg, IL 62675

