



# Holiday Depot Application 2023

OFFICE USE ONLY	
Date Reviewed	_____
Date Entered	_____
Assigned Gifts	_____
Food Assigned	_____

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

(If post office box, also give address and apt. #)

City \_\_\_\_\_ Twp \_\_\_\_\_ Zip \_\_\_\_\_

Provide a phone number and a message number in case we need to reach you about your Holiday package. **MUST HAVE 2 DIFFERENT CONTACT NUMBERS IF WE CAN'T REACH YOU, NO GIFTS!**

Phone number (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Message phone number (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

School District you live in \_\_\_\_\_

City or Township of \_\_\_\_\_

**List every person residing at this address, whether they want help or not** (use two sheets if necessary)

**Total # Residing in Household** \_\_\_\_\_ **Email** \_\_\_\_\_

BC or SS	First Name	Last Name	Sex	Age	Veteran	Gift List. List realistic gifts for each person. If clothing/shoes, give size. No item costing more than \$50. <b>List food basket if needed.</b> If person wants nothing, write "NOTHING". Please write legible.
					Yes No	
					Yes No	
					Yes No	
					Yes No	
					Yes No	
					Yes No	

Does an adult in the home speak English? Yes No Who? _____	**Required if No Income	Dates Case Covers _____
DHS Case# _____		

