

West Fork School-Rockwell
"Christmas for Kids" Application

All information included in this application will be kept strictly confidential.

If you have questions regarding how personal information will be handled,
please contact Jennifer Schmidt for details (641)822-3234 ext.1205

All gifts must be picked-up on Monday, December 19th or Tuesday, December 20th
between the hours 8:00 am - 3:00 pm in the superintendent's office in Rockwell.
Pick-up can also be arranged for Wednesday, December 21st by appointment only.

Parent Name _____

Address and City _____

Phone Numbers _____

Please list any numbers where you could be reached from 7:00 am – 6:30 pm.

Briefly describe why you would like to be considered for this program.

Number of people living in your home Adults _____ Children _____

Please list any items that your household is in NEED of. Some ideas from past years are: kitchen towels, baking pans, blankets, etc. If you do not need things for your home, please leave blank.

On the "wish lists," **please indicate what your child most wants or is in most need of**, since funds may be limited. Include toddler, youth, or adult when giving sizes, for example: 8 youth or Adult Medium. Indicate what type of toys and characters your child likes, for example: Hannah Montana, Minnesota Vikings, board games, remote control cars, etc. If listing DVDs or CDs- be specific. Keep in mind, including too much information in your description is better than not enough. If you have questions while completing this, call Mrs. Schmidt 822-3234 ext 1205

Child #1 Name _____ **Age** _____

WHAT WOULD YOUR CHILD LIKE FOR CHRISTMAS?

TOYS/GAMES Please be as specific as possible.

1. _____
2. _____

CLOTHING (Include size and color if appropriate)

1. _____
2. _____

List favorite color, characters, sports team, interests, etc. Anything that will help us select pleasing gifts.

WHAT DOES YOUR CHILD NEED? Please fill out the information for only the items your child needs.
Please be specific with sizes (For Example: 2T, Med. Youth, Small Men's, etc.)

Shoes _____ Socks _____ Underwear _____ PJ's _____

Gloves _____ Hat _____ Coat _____ Winter Boots _____

Child #2 Name _____ **Age** _____

For all students, use same instructions as Child 1.

WHAT WOULD YOUR CHILD LIKE FOR CHRISTMAS?

TOYS/GAMES Please be as specific as possible.

1. _____
2. _____

CLOTHING (Include size and color if appropriate)

1. _____
2. _____

List favorite color, characters, sports team, interests, etc. Anything that will help us select pleasing gifts.

WHAT DOES YOUR CHILD NEED?

Shoes _____ Socks _____ Underwear _____ PJ's _____

Gloves _____ Hat _____ Coat _____ Winter Boots _____

Child #3 Name _____ Age _____

For all students, use same instructions as Child 1.

WHAT WOULD YOUR CHILD LIKE FOR CHRISTMAS?

TOYS/GAMES Please be as specific as possible.

1. _____
2. _____

CLOTHING (Include size and color if appropriate)

1. _____
2. _____

List favorite color, characters, sports team, interests, etc. Anything that will help us select pleasing gifts.

WHAT DOES YOUR CHILD NEED?

Shoes _____ Socks _____ Underwear _____ PJ's _____
Gloves _____ Hat _____ Coat _____ Winter Boots _____

Child #4 Name _____ Age _____

For all students, use same instructions as Child 1.

WHAT WOULD YOUR CHILD LIKE FOR CHRISTMAS?

TOYS/GAMES Please be as specific as possible.

1. _____
2. _____

CLOTHING (Include size and color if appropriate)

1. _____
2. _____

List favorite color, characters, sports team, interests, etc. Anything that will help us select pleasing gifts.

WHAT DOES YOUR CHILD NEED?

Shoes _____ Socks _____ Underwear _____ PJ's _____
Gloves _____ Hat _____ Coat _____ Winter Boots _____