

Kiwanis Christmas Project 2018

Request for Assistance Form

If you have more than 1 child, please complete additional forms.

**Beginning November 1, 2018 The Kiwanis of Dover-Foxcroft Christmas Project
Will be accepting Requests for Assistance for Christmas 2018**

If your family lives in the towns served by RSU #68 (Charleston, Dover-Foxcroft, Monson, and Sebec) **AND** your family needs assistance in providing warm winter clothing and a gift for each of your children (ages infant – 17 years old) this Christmas, we may be able to help.



You can request assistance one of three ways.

1. Visit us on-line at www.doverfoxcroftkiwanis.org and click on the link after Nov 1st, 2018.
2. Visit us online at our Facebook page *DFKiwanis and click on the link provided after Nov 1, 2018.
3. Fill out the form on bottom of this notice and mail it back to us, Attention: Christmas Project, Kiwanis Club of Dover-Foxcroft, PO Box 615, Dover-Foxcroft, ME 04426.

*Type DFkiwanis in the Facebook search bar at the top of your news feed once you log in.

Deadline to apply is Friday, November 30, 2018

Do Not Return This Form to the School – Return it to the Address Listed Above.

The Kiwanis Christmas Project is a collaborative effort between many community groups. You will receive a postcard, a phone call, or an email from the coordinator(s) to let you know when and where to pick up your request some time before December 15, 2018. We assure you that we will notify your family as your individual requests are ready for pickup and give you all the details of when and where to pick up. Thank you for your understanding

*Completing this application, answering yes to a question, or listing a particular item does not necessarily guarantee that we will be able to fill the request as completed, as all items are donated to this project. Thank you for your understanding. Applicants requesting assistance from the project should be aware they are agreeing not to sign up for other Christmas assistance programs.

Thank you for your cooperation

PLEASE RETURN THIS FORM TO: Kiwanis of Dover-Foxcroft, PO Box 615, Dover-Foxcroft, ME 04426

By Deadline: Friday, November 30, 2018

First&Last Name of Parent/Guardian: _____

Physical Address: _____ City: _____ State: ME ZIP: _____

Mailing Address: _____ City: _____
State: ME ZIP: _____

Phone Number: _____ Secondary Phone _____

Email Address: _____

What town does your family reside in (circle) Charleston /Dover-Foxcroft /Monson/ Sebec

Child's First and Last Name: _____

Birth Date: ____/____/____

Child's Gender (Circle): __ Boy __ Girl _____ Child's Age: _____

Does Child Need Jacket (circle)? Yes No If Yes, Size needed: ____ Size (circle)
Toddler __ Child __ Adult

Does Child Need Boots (circle)? Yes No_ If Yes, Size needed: ____ Size (circle)
Toddler __ Child __ Adult

Child's Toy Wish (1 item less than \$30): _____

Child's Interests, Favorite Color or Character, activities they enjoy, and other warm clothes they need (Please include sizes:)

