

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_ Email \_\_\_\_\_

Address: \_\_\_\_\_

Please list all adults over 18 that live in your household (including yourself):

First Name	Last Name	Date of Birth

Please list all children under the age of 18 that live in your household:

First Name	Last Name	Date of Birth	School

**Please circle your race:** Asian      Black/African American      Hispanic      White      Other

**Please circle your yearly income level:**      under \$13,000      \$13,000-\$23,000

\$23,001-\$33,000      \$33,001-\$43,000      \$43,001-above

**Franklin Community Center, Inc. will be checking with all other agencies to verify that you are not receiving assistance from any other organization.**

**Have you or do you plan to apply to receive holiday assistance from any other agency this year? \_\_**

If yes, what is the name of the agency? \_\_\_\_\_

**I understand by signing below that Franklin Community Center will be checking to see that I am not receiving assistance from any other organization. If it is found that I have applied elsewhere for assistance, I understand I will be contacted and not receive assistance from Franklin Community Center.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

*For internal use only*

Tracking Number: \_\_\_\_\_

Date of Application: \_\_\_\_\_

Staff Member: \_\_\_\_\_

Database Updated: \_\_\_\_\_

Adopted by Other Agency Check: \_\_\_\_\_

Comments: \_\_\_\_\_

Proof of Residency: \_\_\_\_\_

First Name of Child: \_\_\_\_\_ Age: \_\_\_\_\_

Circle one:      **Boy**          **Girl**          **Other**

**Something you want**

1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

3<sup>rd</sup> Choice \_\_\_\_\_

**Something you need**

1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

3<sup>rd</sup> Choice \_\_\_\_\_

**Something you wear**

1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

3<sup>rd</sup> Choice \_\_\_\_\_

**Size Info (be specific - please circle):**

**Tops (circle one):**    Infant      Toddler      Child      Juniors      Adults

**XS**

**S**

**M**

**L**

**XL**

**XXL**

**Numeric top size:**

**Bottoms (circle one):**    Infant      Toddler      Child      Juniors      Adults

**XS**

**S**

**M**

**L**

**XL**

**XXL**

**Numeric bottom size:**

**Shoe Size: (circle one):**    Infant      Toddler      Youth      Women      Men

**Numeric Size:**

**Favorite Color (Please circle any):**    Red    Orange    Yellow    Green    Blue    Purple    Pink  
White    Black

**Any other information you would like us to know:**

**First Name of Child:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Circle one:**    **Boy**        **Girl**        **Other**

**Something you want**

1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

3<sup>rd</sup> Choice \_\_\_\_\_

**Something you need**

1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

3<sup>rd</sup> Choice \_\_\_\_\_

**Something you wear**

1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

3<sup>rd</sup> Choice \_\_\_\_\_

**Size Info (be specific - please circle):**

**Tops (circle one):**    Infant    Toddler    Child    Juniors    Adults

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**M**

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**XL**

**XXL**

**Numeric top size:**

**Bottoms (circle one):**    Infant    Toddler    Child    Juniors    Adults

**XS**

**S**

**M**

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**XXL**

**Numeric bottom size:**

**Shoe Size: (circle one):**    Infant    Toddler    Youth    Women    Men

**Numeric Size:**

**Favorite Color (Please circle any):** Red    Orange    Yellow    Green    Blue    Purple    Pink  
White    Black

**Any other information you would like us to know:**

First Name of Child: \_\_\_\_\_ Age: \_\_\_\_\_

Circle one:    **Boy**       **Girl**       **Other**

**Something you want**

1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

3<sup>rd</sup> Choice \_\_\_\_\_

**Something you need**

1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

3<sup>rd</sup> Choice \_\_\_\_\_

**Something you wear**

1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

3<sup>rd</sup> Choice \_\_\_\_\_

**Size Info (be specific - please circle):**

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**Numeric bottom size:**

**Shoe Size: (circle one):**    Infant    Toddler    Youth    Women    Men

**Numeric Size:**

**Favorite Color (Please circle any):** Red    Orange    Yellow    Green    Blue    Purple    Pink  
White    Black

**Any other information you would like us to know:**

First Name of Child: \_\_\_\_\_ Age: \_\_\_\_\_

Circle one:    **Boy**        **Girl**        **Other**

**Something you want**

1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

3<sup>rd</sup> Choice \_\_\_\_\_

**Something you need**

1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

3<sup>rd</sup> Choice \_\_\_\_\_

**Something you wear**

1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

3<sup>rd</sup> Choice \_\_\_\_\_

**Size Info (be specific - please circle):**

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**Shoe Size: (circle one):**    Infant    Toddler    Youth    Women    Men

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**Favorite Color (Please circle any):**    Red    Orange    Yellow    Green    Blue    Purple    Pink  
White    Black

**Any other information you would like us to know:**

**First Name of Child:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Circle one:**      **Boy**      **Girl**      **Other**

**Something you want**

1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

3<sup>rd</sup> Choice \_\_\_\_\_

**Something you need**

1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

3<sup>rd</sup> Choice \_\_\_\_\_

**Something you wear**

1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

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**Size Info (be specific - please circle):**

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White Black

**Any other information you would like us to know:**