

I hereby acknowledge that I have received the toys from the Marine Corps League/Toys For Kids per this application. (To be signed at time of pick up.)

Signature _____

Date _____

APP. NO. _____

TOYS FOR KIDS APPLICATION FORM

I request Heartland Detachment Marine Corps League to assist me to provide Christmas gifts for the children listed below. I understand that the Toys For Kids program **does not provide gifts for children over 15 years** of age. I certify that I am the parent or legal guardian of the child or children listed; they currently reside in my household; and the information provided herein is true to the best of my knowledge.

(PRINT Parent or Guardian's)
Last Name / First Name / Middle

(Spouse's name, if applicable)

(Current Address)

(Applicant's Telephone No.)

(City & Zip Code)

(Alternate Tel. No. - Work or other)

Child's Name (First & Last)	B (Boy) or G (Girl)	Age	Suggested Gift	
			PRIMARY GIFT	SECONDARY GIFT
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Special requirements (Child's disabilities, allergies, etc.) _____

Did you receive assistance from Toys For Kids last year?

YES NO

Are you a veteran?

Yes No

For the purpose of avoiding duplication of requests I authorize the Marine Corps League and other agencies providing gift assistance programs to cross-check applications.

I have been informed of the scheduled time and place to pick up the toys and gifts and I understand that personal ID will be required at that time. If I am unable to personally pick up the gifts, I hereby authorize:

_____ to do so as my agent.
(Name and relationship)

Recipients of these toys hold the Marine Corps League and Toys for Kids harmless on any defects

(Signature)

(Date)

(TFK Appl. Rev. 9/11)

Applicant's Email Address - For confirmation of application.

You must provide a copy of the following documents in order for your application to be considered submitted: Applicant's Driver's License, Proof of Address and a copy of EACH child's birth certificate.

Printed Name _____

PICK UP DATE: 12/15/2022
TIME OF PICK UP: 8-12 & 1-4 at the Armory

Submit completed Application & required documents via email to CW.ToysForKids@gmail.com OR Print and drop off in person. See <https://www.peoplesecurity.com/toysforkids> for dates and location.

App. No. _____

Toys For Kids