



## CHRISTMAS SUPPORTS REGISTRATION FAMILY INFORMATION

*Confidential – this information will not be provided to anyone*

<b>Last Name:</b> _____ <b>First Name:</b> _____ <b>Spouse / Partner</b> _____  <b>Children(s) Names / school attended:</b> 1. _____ 2. _____ 3. _____ 4. _____	<b>Address (please include legal land description)</b>  <hr/>	
	<b>Contact numbers:</b>  <b>Home phone –</b> _____  <b>Work phone –</b> _____  <b>Cell phone -</b> _____	<b>Email address:</b>  _____  _____
The MD of Foothills FCSS works with other FCSS groups that provide Christmas support. Please identify other services you may be accessing.  <ul style="list-style-type: none"> <li>High River/Oilfields/Okotoks Christmas Hampers</li> <li>A visit from Magic of Christmas</li> <li>Christmas support from a school, church, or community agency (please identify)</li> </ul> _____	<b>Please provide a few details that would describe your current situation</b> _____ _____ _____ _____ _____ _____	

**CONSENT**

- I give the MD of Foothills FCSS permission to share identifying information (name, phone number, and address) with the additional services listed for the purposes of coordinating Christmas supports for the period of Oct – Dec of this year.
- I declare that the information provided on this form is true.

**Signature Required:** \_\_\_\_\_ **Date:** \_\_\_\_\_



**CHILDREN** \*please use discretion with gift items.

Gender (circle)	Age	Is clothing needed? Yes/no. If yes, please indicate what items.	Sizes -shirt -pant -shoe	Gift Items (2)	Favorite Colors, Stores, etc.	Hobbies and Interests
Male or Female	y/n			1.		
				2.		
Male or Female	y/n			1.		
				2.		
Male or Female	y/n			1.		
				2.		
Male or Female	y/n			1.		
				2.		

**HOUSEHOLD ITEMS**

Please List household items you are in need of, such as sheets (indicate sizes and preferred colors), cleaning supplies, small appliances, etc.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**OTHER GIFT IDEAS**

**Occasionally** we are able to provide “extras” not listed above. Please check off any items that your family could benefit from, and identify the preferred source of any assistance (eg Sobeys grocery cards, Okotoks Cinemas, etc).

Bowling passes		grocery gift cards	
Cinema passes		gas cards	
Rec Centre Passes		Restaurant gift certificates	
Other (please specify):			