2024 OAKLAND ROTARY CHRISTMAS PROJECT APPLICATION

(Must be returned by November 25, 2024)

Family Name:			
Street Address:	City		
			(Please give only one number that will be the of the project. Call 301.616.5014 with questions regarding
	text messa	ge or pl	GS MUST BE PICKED UP hone call of the location for pick up. You will receive so mark your calendar with the following date:
F	<mark>riday, De</mark>	e <mark>cemb</mark> e	er 13 from 4:00 p.m7:00 p.m.
PLEASE do not	fill out mor	e than or	ne application. Duplicate applications will be discarded.
			to the WIC Office at the Garrett County Health cres Garden Center by November 25, 2024)
Number of Adults in	household	l: _	
Number of <u>Children</u>	in househo	old: _	
information along w	ith two gift	sugges	younger by name and fill in all the requested tions. The Oakland Rotary Club does not purchase gifting, however mittens, gloves, etc., are acceptable.
NAME OF CHILD	SEX	AGE	GIFT SUGGESTIONS- NO CLOTHING OR GIFT CARDS
1.			1.
			2.
2.			1.
			2.
3.			1.
J.			2.
			TEMENT: DO NOT LEAVE BLANK
	•		ircle one) If employed, where:
		,	e one) If employed, where:
			before taxes:
Total Monthly Food	Assistance	e Amoui	nt:
I solemnly affirm under my knowledge, inform			rjury that the content provided herein are true to the best of
Date			Signature