

# **HOLIDAY ASSISTANCE APPLICATION**

**Ministries Unlimited | 310 Collinsville Rd | Troy, IL 62294**

In order to receive assistance for Thanksgiving and/or Christmas, please fill out this application, check holiday(s), and include all information requested or required (\*). No one can receive assistance without completing an application.

**DEADLINE: October 31<sup>st</sup>**

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**Assistance Requested For:**       **Thanksgiving (Turkey)**       **Christmas (Ham)**

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**Please PRINT CLEARLY**

Name\*: \_\_\_\_\_

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

City\*: \_\_\_\_\_ State\*: \_\_\_\_\_ Zip\*: \_\_\_\_\_

Email\*: \_\_\_\_\_

Family Members\*: Number of Adults \_\_\_\_\_ Number of Children (age 18 and under) \_\_\_\_\_

Total Number In Household\*: \_\_\_\_\_

Phone\*: \_\_\_\_\_ Alternate Phone\*: \_\_\_\_\_

**Please Check Only One Preference For Drink**

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**Drink:**       **Tea**       **Coffee**

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**All Boxes Will Include**

Food for a Christmas meal, extra food for the holiday break, cleaning supplies, & a puzzle book.

**Signature and Approval**

**READ:** Your signature and submission of this application provides your consent and approval that this information is valid and you agree that you can be contacted by phone, email or mail. Reminder calls and emails will be sent the week before scheduled delivery (Thanksgiving) or pickup (Christmas).

**THANKSGIVING DELIVERY DATE: Families will be split between the two sponsoring churches.**

**SATURDAY NOVEMBER 22<sup>nd</sup> FROM 9:00 – NOON for Collinsville-Troy Church of God deliveries**

**SUNDAY NOVEMBER 23<sup>rd</sup> From 10:00 – 1:00 for Troy Methodist Church deliveries**

**CHRISTMAS PICKUP DATE:**

**SATURDAY DECEMBER 13<sup>TH</sup> FROM 9:00 – NOON**

**BETHEL BAPTIST CHURCH**

**7775 COLLINSVILLE RD, TROY**

**APPLICANT SIGNATURE:** \_\_\_\_\_

See Reverse Side for Family Information

## FAMILY INFORMATION

Please specify sizes for clothes, shoes, coats, & specify size for bedroom items.

<u>Family Member Full Name</u>	<u>Age</u>		
1. _____	_____	<input type="checkbox"/> F <input type="checkbox"/> M Relationship: <u>SELF</u>	School: _____
Gift Suggestion: _____			
2. _____	_____	<input type="checkbox"/> F <input type="checkbox"/> M Relationship: _____	School: _____
Gift Suggestion: _____			
3. _____	_____	<input type="checkbox"/> F <input type="checkbox"/> M Relationship: _____	School: _____
Gift Suggestion: _____			
4. _____	_____	<input type="checkbox"/> F <input type="checkbox"/> M Relationship: _____	School: _____
Gift Suggestion: _____			
5. _____	_____	<input type="checkbox"/> F <input type="checkbox"/> M Relationship: _____	School: _____
Gift Suggestion: _____			
6. _____	_____	<input type="checkbox"/> F <input type="checkbox"/> M Relationship: _____	School: _____
Gift Suggestion: _____			
7. _____	_____	<input type="checkbox"/> F <input type="checkbox"/> M Relationship: _____	School: _____
Gift Suggestion: _____			
8. _____	_____	<input type="checkbox"/> F <input type="checkbox"/> M Relationship: _____	School: _____
Gift Suggestion: _____			
9. _____	_____	<input type="checkbox"/> F <input type="checkbox"/> M Relationship: _____	School: _____
Gift Suggestion: _____			
10. _____	_____	<input type="checkbox"/> F <input type="checkbox"/> M Relationship: _____	School: _____
Gift Suggestion: _____			

Please list any household needs that would help this holiday season: \_\_\_\_\_

\_\_\_\_\_