



# IFCS Holiday 2018 Registration Form

IFCS STAFF USE:	Fam# _____	P# _____
IA: _____	DE: _____	QC: _____ IFCS DB: _____
File Name:		

The Holiday program provides your family with a Christmas basket and gifts. Individuals from congregations and other organizations will sponsor your family. If you are interested in participating in the program, please fill out the form below. Please print all information. **Signing up for the program does not guarantee that your family will be sponsored.**

## CHRISTMAS ONLY

### Contact Information

Name (Please print):	First Name:	Last Name:		
Street Address:	Circle one: St. Ave. Pkwy. Blvd. CT. Pl. Rd. Cir. Dr. Way. Ln. Hwy.			Apt #: _____ City: _____ Zip: _____
Phone:	Cell/home: _____	Work: _____	Email: _____	
Alternative contact Name:		Alternate Contact Number:		

### SIZES

Staff Use Only (QC)	First and Last Name	M/F	Age	G/Jr /W M/B	Shirt Size	Pant Size	Favorite Color	Gift Ideas (2 gifts under \$20)	Name of School
	a.								
	b.								
	c.								
	d.								
	e.								

### IFCS USE ONLY

### NOTES

- Signing up for the program does not guarantee that your family will be sponsored.
- I understand that failure to pick up Holiday items could prohibit me from future participation in IFCS Christmas programs.
- I understand that requests for specific clothing and gift items in no way guarantees receipt of these items.
- I give permission to IFCS to provide above information to appropriate school officials for the expressed purpose of executing the Holiday program.
- I give IFCS permission to take and post photographs and videos, upon guardian's verbal consent, to use in IFCS materials and publications.
- I understand that I will only be receiving a Christmas basket. I will not be receiving any food for Thanksgiving.

Signature \_\_\_\_\_

Date \_\_\_\_\_