



Cares for Kids At Christmas *Nomination Form*

Name of Nominated Family: _____

Mom's Name: _____ Dad's Name: _____

Family's Address: _____ City: _____ Zip: _____

Family's day phone #: _____ Family's Night phone #: _____

Name of Submitter: _____

Submitter day phone #: _____ Submitter Night phone #: _____

The Children:

Please tell us 1 (one) want and 1 (one) need per person. (include clothing sizes if applicable):

Name's:	Ages:	Would like a:	Needs a:	Shirt Size:	Pants Size:	Shoe Size:
1. _____	_____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____	_____	_____
6. _____	_____	_____	_____	_____	_____	_____

Tell us a little about this family:
