

Project Concern 2025 Holiday Gift Project

****ONLY Children in your Household under 18 years old****

Pick-up date and time: **Sat. Dec. 20th, 9:00am – Noon** Patron Initials: _____

By initialing here, I agree to pick up the gifts during the designated time. I understand that gift cards may be substituted for gift requests when needed. Please list only 1 to 3 gift ideas for each child. **Each child's gift request must cost \$30 or less total.**

Requests must be turned in by Monday, November 17th

Head of Household: _____

Last Name

First Name

Address

Phone Number or E-mail

Child's First Name: _____ Age _____ Gender _____ Shoe size _____

Clothing SIZE (circle one) Infant - Toddler – Girl's - Misses - Women's - Boy's - Men's

Write in the correct size _____

Desired Item/s: _____

Child's First Name: _____ Age _____ Gender _____ Shoe size _____

Clothing SIZE: (circle one) Infant - Toddler – Girl's - Misses - Women's - Boy's - Men's

Write in the correct size _____

Desired Item/s: _____

Child's First Name: _____ Age _____ Gender _____ Shoe size _____

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Desired Item/s: _____