



## Hanson Community Christmas Application

*If you are seeking assistance this holiday season, please complete this application and mail it to the following address **no later than November 30, 2019.***

Hanson Community Christmas  
P.O. Box 243  
Hanson, MA 02341

Once we receive your application, we will send you your family's ID # and pick-up information.

**\*You must include proof of Hanson residency with this application by including a copy of a current bill showing your name and address. Applications missing this information will not be considered.**

Name: \_\_\_\_\_ Phone \_\_\_\_\_

Address: \_\_\_\_\_ Email \_\_\_\_\_

Please tell us about your family: Number of Adults \_\_\_\_\_ Number of Children \_\_\_\_\_

Ages of everyone in household \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_

If you receive assistance from other sources, please indicate below:

_____ SNAP	_____ Food Pantry
_____ Fuel Assistance	_____ Church
_____ Social Security	_____ Other _____

Do you need a Christmas tree? Yes \_\_\_\_\_ No \_\_\_\_\_

Please write a brief statement about your family's situation so we can best assist you.

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Please use the following page to provide gift ideas for your children.  
***Please complete the information below. Do not request gift cards.***

Child's Age \_\_\_\_\_ Gender \_\_\_\_\_ Grade \_\_\_\_\_ Clothing Size \_\_\_\_\_ Shoe Size \_\_\_\_\_

Child's Interests/Hobbies \_\_\_\_\_

Please suggest specific items for your child:

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Child's Age \_\_\_\_\_ Gender \_\_\_\_\_ Grade \_\_\_\_\_ Clothing Size \_\_\_\_\_ Shoe Size \_\_\_\_\_

Child's Interests/Hobbies \_\_\_\_\_

Please suggest specific items for your child:

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Child's Age \_\_\_\_\_ Gender \_\_\_\_\_ Grade \_\_\_\_\_ Clothing Size \_\_\_\_\_ Shoe Size \_\_\_\_\_

Child's Interests/Hobbies \_\_\_\_\_

Please suggest specific items for your child:

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Child's Age \_\_\_\_\_ Gender \_\_\_\_\_ Grade \_\_\_\_\_ Clothing Size \_\_\_\_\_ Shoe Size \_\_\_\_\_

Child's Interests/Hobbies \_\_\_\_\_

Please suggest specific items for your child:

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Child's Age \_\_\_\_\_ Gender \_\_\_\_\_ Grade \_\_\_\_\_ Clothing Size \_\_\_\_\_ Shoe Size \_\_\_\_\_

Child's Interests/Hobbies \_\_\_\_\_

Please suggest specific items for your child:

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Please list other needed items below.

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