

ADOPT-A-FAMILY 2018

Donor Participation Form

Donor Name: _____

Phone: (home) _____ (cell) _____

Email Address: _____

Address: _____

Circle One: Are you a family, an organization, or other group? Please describe:

Organization name, if applicable: _____

Please check the areas you wish to participate in:

We will try to honor all requests. Your flexibility in choosing "whatever the need is" is greatly appreciated.

Thanksgiving Food Basket

Size of family: 2 – 4 persons _____

4 – 8 persons _____

Whatever the need is _____

Christmas/Holiday Food Basket

Size of family: 2 – 4 persons _____

4 – 8 persons _____

Whatever the need is _____

Gifts for Children

One child _____

Two children _____

Three children _____

Four children _____

All children in one family _____

Whatever the need is _____

Please return top portion by October 31st, 2018.

Mail: AAF, 16 Lowell St. Reading, MA 01867 or drop in the white mailbox (Town Hall lot).

Please detach and save the lower portion of this form for your own information

I plan to participate in the 2018 Adopt-a-Family program in the following areas:

Thanksgiving Food Basket ... _____

Christmas/Holiday Food Basket ... _____

Christmas/Holiday Gifts for Children ... _____

Drop Off Schedule at the DPW Garage

Thanksgiving Food Basket
Tuesday, November 20th, 2018
8:00 – 9:30 am

Christmas/Holiday Food Baskets and Gifts
Thursday, December 20th, 2018
8:00 – 9:30 am

It is imperative that you drop off your items by 9:30 am.

The recipients are scheduled to arrive at 10:30 am to pick up food and gift baskets.