



Dear Parents and Guardians,

St. Peter's Lutheran Church and the Lincoln-Central Neighborhood Family Center are sponsoring Angels of Love holiday gift program again. By providing the information on the form below, your child will receive at least two free gifts for Christmas. (We bet they have already started their lists!)

You may fill out one form for every child in your household up to age 18. Requests may include three items of your child's choice (please be specific). Your child may/may not receive the specific items listed. Please return forms to the LCNFC at 1039 Sycamore Street (drop off or mail) no later than October 31. You may only register your child for one holiday gift assistance program in Bartholomew County.

**Gifts will be distributed with social distancing on Sunday, December 13 at St. Peter's Lutheran Church. Check-in begins at 1:30 p.m. Please mark your calendars!**

Additionally—by registering you are eligible to receive a free holiday food visit from Love Chapel! This is in addition to a regular monthly visit. If you are not interested in visiting the holiday food pantry, please check the line below. Otherwise, you will be registered for food. Dates and locations for the Holiday Food Visit will be mailed to you in early December.

## Angels of Love

**If you have any questions, please call the LCNFC at (812) 379-1630!**

*In order for more families to receive holiday assistance this year, participants will be registered with the Community Holiday Assistance Program. This may affect your child's participation in other holiday assistance programs. By registering your child for this program, you are granting us your permission to share this information. We will NOT publish this list or reveal the identification of any participants to any other organization. Additionally, by signing below you agree to release and forever discharge LCNFC, St. Peter's and/or donors from any liability, claim, action or cause of action that you or dependents in your care may have by reason of any injury you may receive from gifts received and hold the above harmless and free from any action or omission to act.*

↓ Please PRINT in blanks below... ↓

Parent/Guardian Name	
Parent/Guardian Signature	
Parent/Guardian Date of Birth	
Address	
Contact Phone Numbers (list two)	Primary: _____ Secondary: _____
How many people reside in your home?	Please check if you do NOT want a holiday food visit → <input type="checkbox"/>
NAMES of adults residing in your home	
Child's First AND Last Names	
Male/Female	
Age	
Date of Birth	
Three special wishes (If requesting clothing— <u>INCLUDE SIZES!</u> Please keep requests to under \$25 per item.)	
1.	_____
2.	_____
3.	_____

Additional forms for other children (under age 18) in your house are on the other side of this page!



Child's First AND Last Names	
Male/Female	
Age	
Date of Birth	
Three special wishes ( <u>If requesting clothing—INCLUDE SIZES!</u> ) Please keep requests to under \$25 per item.)	
1.	
2.	
3.	



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Male/Female	
Age	
Date of Birth	
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