SIX NATIONS CHRISTMAS BASKETS
REGISTRATION FORM

P.O. BOX 340, OHSWEKEN, ON N0A 1M0
445-2084 OR SHARON MARTIN @ 445-2080

The Christmas Baskets committee distributes a Christmas Food Basket and toys to families in need. Christmas Baskets is a non-profit organization and is not funded by the government in any way. Therefore, it is important for those receiving baskets and toys to request only what is necessary. **To qualify for toys, children MUST reside with the applicant.**

PLEASE PRINT THE FOLLOWING INFORMATION: **DUE DATE: December 7, 2007**

Last Name **First Name** **Second Name** **Age** **Gender**

Road and Site # **Apartment #** **Phone # or Message #**

FAMILY SIZE _____

Type of Assistance Required: A) Basket Only B) Basket and Toys C) Toys Only

I will pick up my food basket ____ Please deliver my food basket ___

Source of Income: Welfare __ Ontario Disability __ CPP __ Pension __ Other __ None __

Employed Full Time __ Employed Part time __

DEPENDENTS: Include Spouse and all children/individuals living in the home full time:

Last Name	First Name	Age	Gender	Grade

I am aware that I am entitled to assistance from only one agency for food and toys for my family this Christmas season. I have not applied for help from the Salvation Army or any other agency.

Applicants Signature _____ **Volunteer's Initials**_____

Toys Received _____ Food Received _____