

# MCC Christmas Giving Program

## APPLICATION FORM



**Application Deadline: Friday, November 25, 2024**

Mail applications to: PO Box 405, Hope, ID 83836 or email to [mccinhope@gmail.com](mailto:mccinhope@gmail.com)

- Qualifications:**
- Residents living between the ID/MT border and Pack River Rd at SH 200
  - Families will be accepted on a first-come, first-served basis and we will not accept applications past the **application deadline of Friday, Nov 25.**
  - Food Basket: We are working in partnership with the Clark Fork Food Bank for the Food Basket. *If you have any questions, please call the MCC Office at (208) 264-5481 or email [mccinhope@gmail.com](mailto:mccinhope@gmail.com)*

- Pick-up:**
- **Christmas Giving Pick-up: Sat. Dec 14 at the Community Center, 10:30 am – Noon.**  
*(Gifts not picked up on Dec 14 will be available at the MCC office Tue-Thur 9:00-1:30 through Dec 19)*
  - **Food Basket Pick-up: Wed. Dec. 18 at Clark Fork Food Bank, 10:00 – 2:00**  
*(bring a copy of your MCC application)*



Save this top portion for your reference.

**Note: This is NOT an LPOSD Group or Event.**

Date: \_\_\_\_\_

Parent(s) or Guardians (check: M F)

First and Last Name: \_\_\_\_\_

Parent(s) or Guardians (check: M F)

First and Last Name(s): \_\_\_\_\_

Mailing Address \_\_\_\_\_

Physical Address \_\_\_\_\_

E-mail Address \_\_\_\_\_

**Must Include:** Best Contact Phone # \_\_\_\_\_ Alternate Phone # \_\_\_\_\_

Fill in below for all children ages 18 and below requiring assistance. In order to process your request, please **PRINT ALL** the information legibly. Missing information can delay requests being filled.

PRINT ALL INFORMATION		Age	Male / Female (circle one)	Toys / Games / Crafts (12 years and under)	Gift Card (13-18 years)	SPECIAL INTERESTS (please include anything that you think might help us in selecting a gift for your children)
Childs Name						
			M F			
			M F			
			M F			
			M F			
			M F			

Why do you feel you need assistance from the Christmas Giving Program?

\_\_\_\_\_

The above information is true and correct. I understand that if any of the above information is false, I will be declined assistance from the Christmas Giving Program.

Signature \_\_\_\_\_

Date \_\_\_\_\_