**\*Christmas Cheer no longer accepts applications from Single Persons. All single persons living alone without spouse, children or roommate must register in person directly to Salvation Army, 4500 Joyce Avenue, for a Christmas hamper before November 30th.**

**Powell River & District Christmas Cheer Committee**

CHRISTMAS HAMPER APPLICATION

DEADLINE: Submit as early as possible please but must be submitted on or before Saturday, December 7.

HOUSEHOLD NAME: (HOUSEHOLD MEMBER #1) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Church or Club Affiliation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Please list all the members of your household, including yourself, and all the pertinent identification information. Also, if an adult, please identify the relationship to principal household member, i.e., spouse/son/father/roommate/boarder, etc.***

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **HOUSEHOLD MEMBERS** | |  |  | Check one √ | | **ID Type, ID Number & Relationship** |
| **SURNAME** | **FIRST NAME** |  | **Date of birth YY/MM/DD** | Male | Fe-male | Driver’s License or Health Care Number **&** Relationship to Household Member #1 |
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|  |  |  |  |  |  | Note: You must bring ID to pick up |
|  |  |  |  |  |  | Your hamper that matches your address |
|  |  |  |  |  |  |  |

(Fill in below whatever applies to each household member)

|  |  |
| --- | --- |
| Rent | $ |
| Hydro | $ |
| Fuel | $ |
| Telephone | $ |
| Groceries | $ |
| Other | $ |
|  |  |
|  |  |
|  |  |
| Total | $ |

Income sources per month. **Attach proof of income Expenses:**

Please bring Identification on Hamper Distribution Day**. See** [www.pr-christmascheer.com](http://www.pr-christmascheer.com) **for more details or** phone Geri Anderson, 604-489-9866 for information**.**  While we try to contact everyone, it is your responsibility to find out the time, date & location.

I hereby give authorization for my application to be given to the appropriate parties involved in the Christmas Cheer Committee.

Signature

|  |  |
| --- | --- |
| Child Tax Benefit | $ |
| Employment | $ |
| Assistance/Pensions/Disability/OAS | $ |
| Other (Universal Child Care Benefit,  Child Support, Board, etc.) | $ |
|  |  |
|  |  |
|  |  |
| Total | $ |