



# The Salvation Army of Seminole County

## 2017 Angel Tree Program

### FAMILY APPLICATION FORM

CASE NUMBER:
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#### *Parent Information (Please PRINT)*

Name:	Birthdate (MM/DD/YY):	
Address:		
City:	State: FL	Zip Code:
Phone: Home (    )    -	Cell (    )    -	Other (    )    -
Email Address:		

#### *Child Information (Please PRINT)*

FIRST NAME ONLY (of Child)	Sex (B/G)	Birth Date (MM/DD/YY)  <i>(ages 0-12)</i>	Shirt Size	Pant Size	Shoe Size	Suggested Gift First Option * Second Option **  <i>(Select from page 2)</i>
						* **
						* **
						* **
						* **
						* **

Please Note: These gifts are only a suggestion

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## Angel Tree Program

### SUGGESTED GIFT CATEGORIES

*Please Note:*

The gifts are only a suggestion. Your child MAY or MAY NOT receive the suggested gift.

<b>DOLL</b> Muñeca	<b>PLAY KITCHEN</b> Cocina de jugar	<b>COSTUME OUTFITS</b> Disfraces para jugar	<b>DVD PLAYER</b> Reproductor de DVD
<b>DOLLHOUSE</b> Casa de muñeca	<b>TABLE &amp; CHAIRS</b> Mesa & Sillas	<b>ARTS &amp; CRAFTS</b> Manualidades y arte	<b>HAND HELD VIDEO GAME</b> Videojuego de mano
<b>ACTION FIGURES</b> Figuras de acción	<b>SPORTS ITEMS</b> Artículos deportivos	<b>ROBOT / REMOTE CONTROL ITEM</b> Robot / artículo a control remote	<b>BUILDING SET</b> Juegos de piezas para armar
<b>BOUNCER / PLAYMAT</b> Tendido para jugar	<b>MUSICAL ITEM</b> Artículo musical	<b>RIDE ON FOR TODDLERS</b> Juguete para montar	<b>PUSH / PULL TOY</b> Juguete de empujar / jalar
<b>OUTDOOR TOY</b> Juegos para el patio	<b>EDUCATIONAL ITEMS</b> Artículos educativos	<b>MP3 PLAYER</b> Reproductor de MP3	<b>ROLLER BLADES / SKATES</b> Cuchillas de rodillos / patines
<b>BIKE</b> Bicicleta	<b>BOARD GAMES</b> Juegos de mesa	<b>SKATEBOARD</b> Tabla de patinar	<b>SCOOTER</b> Patineta

I, \_\_\_\_\_, give The Salvation Army permission to:

- Share my information with other agencies in reference to the Angel Tree Program.
- Use any pictures taken of myself for public relations purposes.

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**APPLICANT SIGNATURE**

**DATE SIGNED**

*Please read and initial both consents. Sign and date the form on the line marked APPLICANT SIGNATURE*