



Toys For Joy



A Holiday Program for Sunapee Residents Sponsored by the Sunapee Welfare Department

Parent's Last Name: _____ First Name: _____ Phone: _____

Parent's Street Address: _____ Email: _____

Person completing form must be the child's custodial parent AND Sunapee resident. I certify this is true _____
(Signature)

Child's address (if different) _____

At times local churches and organizations offer additional assistance. I would _____ I would not _____ like to have contact information shared with those agencies.

Child's Name / Age / Sex

Most Needed Clothing Items & Size

Wish List For Toys

Name

(1) _____

(1) _____

(2) _____

(2) _____

Name

(1) _____

(1) _____

(2) _____

(2) _____

Name

(1) _____

(1) _____

(2) _____

(2) _____

Name

(1) _____

(1) _____

(2) _____

(2) _____

Please remember that this program is about neighbors helping neighbors and, with this in mind, please be reasonable with requests.

Every attempt will be made to fulfill wishes. However, since this program is based on the generosity of donors, we cannot guarantee items.

This form MUST BE returned to the school (or Town Welfare Office) by Monday November 14, 2022