




# Winter Garden Police Athletic League Holiday Gifts For Kids Application

 	
Reviewed by _____	
Registered by _____	
WG PAL use only	

\*\*\*\*All information provided will be verified at registration\*\*\*\*

**Parent(s) or Legal Guardian(s): (Birth certificates or custody paperwork will be required)**

Parent 1: \_\_\_\_\_

Name	DOB	DL or ID#
Place of employment	Job Title	

Parent 2: \_\_\_\_\_

Name	DOB	DL or ID#
Place of employment	Job Title	

**Primary Residence: (A current lease/payment receipt for renters and a current water bill for owners will be required)**

Address: \_\_\_\_\_ Rent / Own

Landlord name and phone number: \_\_\_\_\_

Applicant's phone number: 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

**Children: (Accepting applications for up to 12 years old. Birth certificates will be required)**

Child 1: \_\_\_\_\_

Name (first)	(last)	DOB	M / F Gender
School currently attending		Grade	
Interests			

Child 2: \_\_\_\_\_

Name (first)	(last)	DOB	M / F Gender
School currently attending		Grade	
Interests			

Child 3: \_\_\_\_\_ M / F  
Name (first) (last) DOB Gender  
\_\_\_\_\_  
School currently attending Grade  
\_\_\_\_\_  
Interests

Child 4: \_\_\_\_\_ M / F  
Name (first) (last) DOB Gender  
\_\_\_\_\_  
School currently attending Grade  
\_\_\_\_\_  
Interests

Child 5: \_\_\_\_\_ M / F  
Name (first) (last) DOB Gender  
\_\_\_\_\_  
School currently attending Grade  
\_\_\_\_\_  
Interests

Household Annual Income: \$ \_\_\_\_\_

Do you receive any government assistance? Yes No

Current Government assistance program(s): \_\_\_\_\_  
\_\_\_\_\_

Additional Information: (anything you feel is important for us to know when considering your application)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*\*\*Last day to turn in applications is November 29<sup>th</sup>, 2017. If the application is not complete or the contact information is not valid your application will not be processed\*\*\***

**\*\*\*Please note you are not considered to be registered for the program until contacted by a representative of this organization and given a program receipt\*\*\***