

Use the back if you need more space.

PLEASE PRINT CLEARLY!

Thank you.

Ulysses Christmas Bureau Family Application 2017

IMPORTANT!
Please return this form in the enclosed envelope to:
Ulysses Christmas Bureau
P.O.Box 1002
Trumansburg, NY 14886
by November 17, 2017

Name(female head of household):(first) _____ (last) _____

Name(male head of household):(first) _____ (last) _____

Address:(residence & P.O.box) _____

Phone: _____ Email: _____

Total number of people in household: _____ Adults over 18: _____ Children under 18 _____

Number of household members working: _____ Household income:\$ _____/mo. or \$ _____/year. Where employed: _____

Has anyone in the household ever served in the military? _____

Please tell us about your children. Tell us if they are extra small or extra large for their age, and whether sizes indicated are Child or Adult, Jr., Misses, Women's, Husky, etc.

Child's first & last name	M/F	Age	Grade	Height/ Weight	Dress/Blouse/ Shirt size	Pants/Skirt size	Color Preference	Special Notes and PLEASE tell us whether child or adult size

Books, toy, game suggestions/child's interests: _____

