



Twin Falls  
Reformed church

Office Use Only: Family # \_\_\_\_\_ Team # \_\_\_\_\_  
Called \_\_\_\_\_ Approved \_\_\_\_\_

## APPLICATION FOR CHRISTMAS ASSISTANCE - 2023

**PLEASE NOTE:** Our ministry are for families with kids in the household only. The gifts received are for the children and food items are for the adults.

TODAY'S DATE \_\_\_\_\_

Referred by: (Organization or Person) \_\_\_\_\_

### PLEASE READ CAREFULLY!

Have you applied for Christmas help with any other agency? \_\_\_\_\_

If so, please list other agencies \_\_\_\_\_ All applications are checked with other agencies.

Families are assisted by ONE agency only. Duplications with other agencies may be denied access. **Please understand that requests will be met according to resources available. We may not be able to help everyone who applies.**

I understand it is necessary to give this information to a sponsoring family. I give permission to release this information for the purpose of meeting my request.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_

AGE \_\_\_\_\_ GENDER (M/F) \_\_\_\_\_ SPOUSE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_

TELEPHONE # \_\_\_\_\_

(If no phone, how can we reach you?) \_\_\_\_\_

### **E-MAIL ADDRESS and PHONE REQUIRED**

*Applicants will be notified by e-mail or phone for approval so we must be able to get a hold of you.*

TOTAL NUMBER IN HOUSEHOLD \_\_\_\_\_ (Please list only parents and school-age or younger children below who live in your home.)

SOURCES OF INCOME Wages, SSI, SSD, food stamps, child support, housing & other assistance \_\_\_\_\_

\_\_\_\_\_ TOTAL HOUSEHOLD INCOME PER MONTH \_\_\_\_\_

List in-home family members	Sex	Age	Clothing Needs	Size	Gift Idea
1.					
2.					
3.					
4.					
5.					
6.					
7.					

NOTE: These will likely not be large, expensive gifts. This is not a wish list for Santa. Thanks for understanding. **Turn sheet over and fill out back side over...**

**PLEASE DESCRIBE IN DETAIL WHY THIS CHRISTMAS IS DIFFICULT:**

Do you have a church affiliation? (if so, list your church) \_\_\_\_\_

Would you like to learn about other events at TFRC or programs for families and children? Yes or No

In order for applicants to receive assistance you must attend a Required Orientation Meeting on Thursday, November 16th at 6:00 p.m. **You MUST attend this orientation meeting at Twin Falls Reformed Church.**

Yes or No (*if you have a legitimate reason that you are unable to attend, please notify us in advance -733-6128 ext.109*)

Return To: Twin Falls Reformed Church  
1631 Grandview Dr. N.

**Return NO LATER THAN November 12, 2023**

**Or** E-mail application to [Kristy@tfr.org](mailto:Kristy@tfr.org) with 'Christmas Assistance Application' in the Subject line.

**Or** fax to TFRC at (208) 733-7405

Please note that while Twin Falls Reformed Church will do its best to help those that apply, you must realize that this is only intended to supplement your Christmas. TFRC's goal is not to play Santa Claus – we want to share the love of Jesus and celebrate His birth.