

# **\*\*STOP STAFF ONLY\*\***

**DO NOT WRITE ON THIS SIDE. STAFF ONLY**

**NUM**

**Two forms of identification:** ID/DL and SS Card, Birth Certificate, Light Bill, NC Natural Gas Bill, or Mail /Bill addressed to them

1) Head of House ID /Drivers License's Number \_\_\_\_\_

2) Proof of Identity \_\_\_\_\_ or \_\_\_\_\_

Income Verification: (Circle one)

Check stub TANF Child Support Disability Other \_\_\_\_\_ Total \$ \_\_\_\_\_ Weekly Bi-weekly Monthly

Total Monthly Bills: \$ \_\_\_\_\_

**Staff only: Verify information Yes or No**

**Staff** \_\_\_\_\_



# 2019 Toy Request Form



I have not applied for assistance with the Salvation Army or other Toys for Tots agencies; I understand that if I have requested toys from other agencies, I will not receive toys from New Bern Parks and Recreation. Our toys are from the same agency.

**Last date to apply is November 12, 2019 at 5pm. Sign X** ←

Head of House Hold Name \_\_\_\_\_ ID/Drivers License's Number \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address if different \_\_\_\_\_ Email Address \_\_\_\_\_

Cell Number \_\_\_\_\_ Home Number \_\_\_\_\_ Alternate Number \_\_\_\_\_

**Please Print Clearly** Serving Youth 0-11years old (This is a toy program) **must complete all information**

Child's full Name	Age as of 12/31	Girl or Boy	Child's Birthday	Any Special Accommodations?

*Have a Merry Christmas from New Bern Parks and Recreation*

X \_\_\_\_\_ ←

Head of Household Print Name

Date \_\_\_\_\_

X \_\_\_\_\_ ←

Sign Name

**Staff Name** X \_\_\_\_\_