

2019 Holiday Box Recipient Registration Form

STOP! YOU CAN SAVE A LOT OF TIME BY REGISTERING ONLINE AT WWW.OPENABOXOFHOPE.ORG

-----> Click on "2019 Holiday Box Delivery" <-----

Head of Household (HOH) Information

HOH Name (First & Last)	HOH Phone Number	HOH Email:

HOH Address	Apt	City	State	Zip

HOH Relationship to Child(ren)	HOH Gender		HOH Age	Approx. Annual Income	Total People in Household
	M	F			

Additional Household Info

	Additional Adult's Name (First & Last)	Age	Gender		Relationship To Child(ren)
1			M	F	
2			M	F	
3			M	F	

Child/Student Information

	Child's Name (First & Last)	Age	Child's Birthday	Gender		Grade Level	School Attending
1			__ / __ / __	M	F		
2			__ / __ / __	M	F		
3			__ / __ / __	M	F		
4			__ / __ / __	M	F		
5			__ / __ / __	M	F		
6			__ / __ / __	M	F		
7			__ / __ / __	M	F		
8			__ / __ / __	M	F		

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Child/Student Gift Preferences

This section is to simply give us an idea of your Child/Student's preferences for Christmas presents. This does not mean we can guarantee specific gifts but we will do our best to purchase gifts within these preferences.

	Child's Name (First & Last)	Gift Preference
1		
2		
3		
4		
5		
6		
7		
8		

Additional Notes:

Verification

Application taken by: (First & Last Name)	Agency	Phone Number	Date
			___ / ___ / ___