

# PERRY COUNTY BACK 2 SCHOOL 2021

online application also available at [www.joinhands.help/ourprograms](http://www.joinhands.help/ourprograms)



Name: \_\_\_\_\_ (first, middle, last)

Mailing & physical address (include town/zip) \_\_\_\_\_

Phone (required) (\_\_\_\_\_) \_\_\_\_\_

Email: (\_\_\_\_\_) \_\_\_\_\_

Church Affiliation: \_\_\_\_\_ (if any)

**UPDATE**, you will be assigned a time to come based on your availability and the order in which you applied; and we will call you with the time to bring your children. This should shorten the long lines some of you experienced in the past. Unfortunately, if you show up before your schedule time, you will be asked to come back later.

***We are SO happy you are allowing us to aid you as Perry County Parents and/or Guardians of Perry County children. This is a program designed to allow and empower Perry County school children from kindergarten through 12<sup>th</sup> grade to be able to choose their own school supplies.***

**CHECK BOX:** You understand that,

- Students must live in Perry County,
- Parent or Guardian can only sign up a child of which they are the custodial parent and/or legal guardian.
- A parent or guardian must apply for children to be eligible,
- Children must be present to choose their supplies
- And a Join Hands Ministry volunteer will guide your child through the process while you wait in the lobby.
- Not all applications are guaranteed approval due to limited sponsors/resources.
- Applicant being untruthful will be disqualified from the participation in the Holiday Network and Back to School for a minimum of one year.

## Child 1

Name: \_\_\_\_\_ (first, last) GENDER: \_\_\_\_\_

GRADE: \_\_\_\_\_ SCHOOL: \_\_\_\_\_ SHOE SIZE: \_\_\_\_\_

YOUR RELATIONSHIP TO CHILD: \_\_\_\_\_

## Child 2

Name: \_\_\_\_\_ (first, last) GENDER: \_\_\_\_\_

GRADE: \_\_\_\_\_ SCHOOL: \_\_\_\_\_ SHOE SIZE: \_\_\_\_\_

YOUR RELATIONSHIP TO CHILD: \_\_\_\_\_

## Child 3

Name: \_\_\_\_\_ (first, last) GENDER: \_\_\_\_\_

GRADE: \_\_\_\_\_ SCHOOL: \_\_\_\_\_ SHOE SIZE: \_\_\_\_\_

YOUR RELATIONSHIP TO CHILD: \_\_\_\_\_

## Child 4

Name: \_\_\_\_\_ (first, last) GENDER: \_\_\_\_\_

GRADE: \_\_\_\_\_ SCHOOL: \_\_\_\_\_ SHOE SIZE: \_\_\_\_\_

YOUR RELATIONSHIP TO CHILD: \_\_\_\_\_

***If there are more children, please staple a piece of paper. Please flip over to finish***



**DISCLOSURE AND ACKNOWLEDGEMENT:**

**CHECK BOX:** Information on completed application will be verified with agencies in and out of the network. Once applications have been screened for completeness and accuracy, information will then be shared with Network sponsors to coordinate Back to School assistance.

**PARENTS/GUARDIANS:**

**CHECK BOX:** I Understand that, Join Hands team of volunteers will accompany my children allowing them to choose the school supplies they want/need.

**APPLICANTS:**

**CHECK BOX:** I Understand that, I can only sign up children in which I am the custodial parent or legal guardian of and the children must reside in the applicants' household and be considered a Perry County resident. Not all applications are guaranteed approval due to limited sponsors/resources.

**Signature of Parent and/or Guardian,**

Application signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PARENTS/GUARDIANS: Hair Cuts & Shoe Vouchers**

*\*COMMUNICATION ABOUT a VOUCHER IS TO ONLY GO THROUGH JOIN HANDS MINISTRY.*

**I Understand that,** Shoe Vouchers are usable at **Country Footwear and More**, 221 Market Street, Newport.

\_\_\_\_\_ Yes, I'd like a Shoe Voucher for my child(ren). **OR**

\_\_\_\_\_ Yes, I only need this many Shoe Vouchers.



**NO HAIRCUTS THIS YEAR. SORRY.**

**WE LOOK FORWARD TO HAVING HAIRCUTS BACK NEXT YEAR.**

**TO PICK UP BACK PACKS WITH SUPPLIES:**

You will be assigned a time to come based on your availability and the order in which you applied; and we will call you with the time to bring your children, about a week before we start. Unfortunately, if you show up before your schedule time, you will be asked to come back later.

**Back 2 School Program is Monday, August 15<sup>th</sup> 9am to 6pm, Tuesday, August 17<sup>th</sup> 9am to 6pm and Wednesday, August 18<sup>th</sup> 9am to 6pm (if needed).**

**You will be called with a time to bring your children. The earlier we receive your application, the better chance you will get your first choice of times.**

**You must list the times during these three days when you will NOT be able to come. Also let us know if one or more of your children need a separate time.**

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**Returned completed application to:**

Join Hands Ministry, 51 South Church Street, PO Box 335, New Bloomfield, Pa 17068, (717) 582-7844