

FOOD HAMPER		With Chicken <input type="checkbox"/>	Without Chicken <input type="checkbox"/>	Vegetarian <input type="checkbox"/>
Yes <input type="checkbox"/> I would like to receive a food hamper				
TOY DEPOT – BY APPOINTMENT ONLY				
Yes <input type="checkbox"/> I would like to attend the Toy Depot. Children are not permitted in the Toy Depot.				
Do you require a translator at the Toy Depot?		Preferred language:		
Yes <input type="checkbox"/> No <input type="checkbox"/>				

REGISTRATION HOURS:

Applications must be submitted in person at one of the Deltassist offices, during registration hours:

North Delta: 9097 - 120th Street
Monday to Wednesday ONLY
November 4th to December 11th
Monday -Tuesday 10am – 4pm
Wednesday 11:30am – 4pm

Ladner: #202 – 5000 Bridge Street
November 4th to December 9th
Monday to Friday 9:30am – 12pm and 1pm – 4pm

BE SURE TO BRING ALL REQUIRED DOCUMENTS AS LISTED ON THE INFORMATION SHEET

All information provided by me will be kept in confidence with the exception of the following:
I declare that everything on this application is correct and that Deltassist may contact any of the above to confirm my source of income. I understand that if it cannot be verified I may be disqualified for support from the Deltassist Christmas programs. **I will not be applying elsewhere for a hamper and I give Deltassist the permission to check with other Christmas Programs within Delta, Surrey and the Lower Mainland (if you are found to be registered with another organization or group, your application will be void with Deltassist).**

Applicant Signature:

Date:

Office Use Only Date application received: _____	Please print clearly. No initials please. Staff/Volunteer Name: Counsellor:
Confirmation that client has shown proof of: Income <input type="checkbox"/> Residence <input type="checkbox"/> BC Services Card or other ID for all family members <input type="checkbox"/> Toy Depot Date: _____ Time: _____ Toys Received: _____	Additional Notes: