

**CLEAR LAKE TOWNSHIP
FAMILY WISHES APPLICATION**

CHECKLIST/INSTRUCTION SHEET

(Keep this page for your reference)

Application Deadline: Friday, November 17, 2017
(No late applications will be accepted. No exceptions!)

Applicant Information: Make sure your contact information is accurate. This is the only way we have to contact you with any questions or changes.

Household Information: List everyone in the household, their information and how they are related to you.

Indicate if you have applied for Holiday Assistance from any other agency this year.

Please note: This information will be verified. If you have applied with another organization your Family Wishes application will be denied.

Indicate whether or not we can share your information with a Secret Santa.

Please note: If you answer no, your family will not be able to be adopted. Secret Santas are asked to at least provide the minimum that the program provides. Some Secret Santas choose to do more than that.

Answering yes does not guarantee your family will be adopted. Families that have never been adopted are given preference over families who have previously been adopted.

Indicate whether or not you would be interested in your child(ren) participating in the gift wrapping event for the parent gift(s).

Please note: The date and time of this event has not yet been determined. You will be contacted at a later date to set this up.

Complete the "Children Gift Information" section.

Please note the following:

- *Do not list expensive electronic devices (ex. Cell phones, Xbox, Wii, Playstation, iPhone, iPad, iPod, computers, televisions). These items cannot be purchased.*
- *Do not request gift cards other than iTunes and Microsoft Points. No other gift card requests will be honored.*
- *If you list video games be sure to write in what game system your child has (ex. Xbox 360, Xbox One, Computer, PS3, PS4, PSP, PS Vita, Wii, Wii U, Nintendo DS, Nintendo 3DS).*
- *If your child doesn't have a toy preference, list three (3) of your child's favorite hobbies/interests in order of preference.*

If you have more than five (5) children, attach a separate sheet.

Page 2 – Checklist/Instruction Sheet

- Complete the “Parent Gift Information” section.

Please note the following:

- *No more than \$15 is spent on each parent, unless item is chosen from the approved items list.*
- *No gift card requests will be honored.*
- *If you don't have a preference, list three (3) of your favorite hobbies/interests in order of preference.*

Remember this is a gift your child can give to you.

- Read and sign the Family Wishes Program Terms & Conditions

- Gather the following documentation to submit with the application:

- Two (2) forms of ID for each adult (ex. Driver's license, State ID, Social Security Card, Birth Certificate)
- Social Security Card or Birth Certificate for each child
- Lease (If you don't have a lease you may request a Landlord-Tenant Verification Form from the Township Office.) If you don't rent or lease, provide your mortgage statement.

- Submit the application IN PERSON at the Clear Lake Township Office, no later than Friday, November 17, 2017.

Please note: Applications received by mail, email or fax or applications dropped off by someone other than yourself will not be accepted.

Office hours are Monday – Friday, 8am – 2pm. If you are unable to make it during these times, call the Office to make other arrangements.

- Pick up your gifts on Tuesday, December 19, 2017 at your scheduled time.

Please note: If you are unable to attend and would like to send someone on your behalf, you can request an authorization form from the Office.

**CLEAR LAKE TOWNSHIP
FAMILY WISHES PROGRAM**

TERMS AND CONDITIONS – Your Copy

1. The Family Wishes program is designed to supplement your Christmas needs and not be a complete substitution.
2. The program is open to households with children only.
3. Everyone listed on application to receive assistance must be a resident of Clear Lake Township.
4. Children must be under 18 years of age. (An 18 year old may be eligible, if they reside with their parents and are still enrolled in high school. Proof of this must be provided with application.)
5. Households must provide the following documentation when application is submitted:
 - a. Two (2) forms of ID for adults
 - b. Proof of residency (lease or mortgage statement)
 - c. Proof of dependent children (social security card or birth certificate)
6. Documentation must be current, accurate and complete. Additional information may be requested, as needed, to establish eligibility of participation in the program.
7. The application and required documentation must be submitted in person to the Clear Lake Township Office on or before the deadline.
8. Applications submitted by mail, email or fax or submitted by someone other than yourself will not be accepted.
9. Incomplete applications will be returned.
10. Information provided on and submitted with the application will be cross referenced with the Illinois Department of Human Services Information Database.
11. Providing incomplete, misleading or false information will result in disqualification from the program.
12. Applicants are not allowed to receive holiday assistance from any other agency, organization, church or program. This does not pertain to food baskets.
13. All applications will be crossed checked with other agencies offering holiday assistance. Any duplication found will result in your application being voided and no assistance will be offered.
14. Eligible children will receive, at the least, one outfit (shirt and pants) and a toy (sometimes multiple toys) worth no more than \$30.00.
15. Eligible children are also provided with a gift, worth up to \$15 or one of the program's approved gifts, for each eligible parent.
16. If you have indicated that we can share your information with a Secret Santa, your household may be adopted. A Secret Santa could be another person or family, a business, an organization, a church, etc. Gift information and explanation of circumstance is the only information that will be shared.
17. Adopted households may receive more than the required minimum amount of gifts. This is not the same for every adopted family. The number of items purchased and the amount of money spent on the household and each person in the household is up to the discretion of the Secret Santa.
18. Even if adopted, the Township will make sure each household member receives the minimum.
19. Preference will be given to families who have never been adopted.
20. Items received will be utilized as intended and will not be returned to the store for cash/credit or sold or used for personal profit/gain.
21. Failure to pick up your gifts on the scheduled pick up day will result in disqualification in the program and forfeiture of all gifts. All left over items will be donated back to the program or to another agencies' assistance program.
22. No exceptions will be made to these terms and conditions.
23. The Clear Lake Township Office personnel can answer any questions you may have or assisting you in completing the application.
24. Clear Lake Township's Family Wishes Program abides by all state and federal laws pertaining to CONFIDENTIALITY and NON-DISCRIMINATION.

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CLEAR LAKE TOWNSHIP FAMILY WISHES APPLICATION

APPLICANT INFORMATION

Full Legal Name: _____

Mailing Address: _____

Contact Phone: _____ Alternate Phone: _____

HOUSEHOLD INFORMATION

Full Legal Name	M/F	Birthdate mm/dd/yyyy	Age	Relationship to Applicant
	<input type="checkbox"/> M <input type="checkbox"/> F			Applicant/Self
	<input type="checkbox"/> M <input type="checkbox"/> F			
	<input type="checkbox"/> M <input type="checkbox"/> F			
	<input type="checkbox"/> M <input type="checkbox"/> F			
	<input type="checkbox"/> M <input type="checkbox"/> F			
	<input type="checkbox"/> M <input type="checkbox"/> F			
	<input type="checkbox"/> M <input type="checkbox"/> F			
	<input type="checkbox"/> M <input type="checkbox"/> F			

Please explain your situation. What circumstance(s) created a need for assistance this year?
 (attach a separate sheet, if needed)

Have you applied for any other organization for holiday assistance this year? Yes No

If yes, which organization? _____

May we share your gift and circumstance information with a Secret Santa for family adoption purposes?

Yes No

Would you be interested in your child(ren) attending the gift wrapping event for the parent gift? Yes No

**CLEAR LAKE TOWNSHIP
FAMILY WISHES APPLICATION**

CHILDREN GIFT INFORMATION

Child 1			3 Gifts Under \$30 Each – In Order of Preference		
Age:		<input type="checkbox"/> M <input type="checkbox"/> F	1) _____		
			2) _____		
			3) _____		
Toy ethnicity preference: <input type="checkbox"/> African American <input type="checkbox"/> Caucasian <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic <input type="checkbox"/> Other: _____ <input type="checkbox"/> No Preference					
<i>Be specific as possible.</i> Shirt Size: _____ Pant Size: _____					
If funds allow, does your child need (<i>mark all that apply</i>): <input type="checkbox"/> coat <input type="checkbox"/> undershirts <input type="checkbox"/> underwear <input type="checkbox"/> shoes _____ <input type="checkbox"/> socks _____ <small>size</small> <small>size</small>					

Child 2			3 Gifts Under \$30 Each – In Order of Preference		
Age:		<input type="checkbox"/> M <input type="checkbox"/> F	1) _____		
			2) _____		
			3) _____		
Toy ethnicity preference: <input type="checkbox"/> African American <input type="checkbox"/> Caucasian <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic <input type="checkbox"/> Other: _____ <input type="checkbox"/> No Preference					
<i>Be specific as possible.</i> Shirt Size: _____ Pant Size: _____					
If funds allow, does your child need (<i>mark all that apply</i>): <input type="checkbox"/> coat <input type="checkbox"/> undershirts <input type="checkbox"/> underwear <input type="checkbox"/> shoes _____ <input type="checkbox"/> socks _____ <small>size</small> <small>size</small>					

Child 3			3 Gifts Under \$30 Each – In Order of Preference		
Age:		<input type="checkbox"/> M <input type="checkbox"/> F	1) _____		
			2) _____		
			3) _____		
Toy ethnicity preference: <input type="checkbox"/> African American <input type="checkbox"/> Caucasian <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic <input type="checkbox"/> Other: _____ <input type="checkbox"/> No Preference					
<i>Be specific as possible.</i> Shirt Size: _____ Pant Size: _____					
If funds allow, does your child need (<i>mark all that apply</i>): <input type="checkbox"/> coat <input type="checkbox"/> undershirts <input type="checkbox"/> underwear <input type="checkbox"/> shoes _____ <input type="checkbox"/> socks _____ <small>size</small> <small>size</small>					

**CLEAR LAKE TOWNSHIP
FAMILY WISHES PROGRAM**

For Office Use only
Family # _____

TERMS AND CONDITIONS

1. The Family Wishes program is designed to supplement your Christmas needs and not be a complete substitution.
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18. Even if adopted, the Township will make sure each household member receives the minimum.

For Office Use only Family # _____

- 19. Preference will be given to families who have never been adopted.
- 20. Items received will be utilized as intended and will not be returned to the store for cash/credit or sold or used for personal profit/gain.
- 21. Failure to pick up your gifts on the scheduled pick up day will result in disqualification in the program and forfeiture of all gifts. All left over items will be donated back to the program or to another agencies' assistance program.
- 22. No exceptions will be made to these terms and conditions.
- 23. The Clear Lake Township Office personnel can answer any questions you may have or assisting you in completing the application.
- 24. Clear Lake Township's Family Wishes Program abides by all state and federal laws pertaining to CONFIDENTIALITY and NON-DISCRIMINATION.

By signing below, I acknowledge I have read, understand and received a copy of the terms and conditions of the Family Wishes Program; I authorize release of my application information to other agencies, organizations, churches and programs offering holiday assistance; and I certify that the information I provided on this application and the documentation I submitted with it are accurate to the best of my knowledge.

Signature of Applicant

Date