

ANGEL TREE APPLICATION

Address:			
Phone:			
Children must be	under the age o	of 18.	
First & Last Name	es of ALL childre	n living at this address:	
Child's Name:		Age by Christmas:	Sex:_
Sizes: Shirt:	Pants:	Undergarments/Diapers:	
Height:	_ Weight:	Favorite Color:	
Child's Interests:			
Child's Name:		Age by Christmas:	Sex:_
Sizes: Shirt:	Pants:	Undergarments/Diapers:	
Height:	_ Weight:	Favorite Color:	
Child's Interests:			
Child's Name:		Age by Christmas:	Sex:_
Sizes: Shirt:	Pants:	Undergarments/Diapers:	
Height:	_ Weight:	Favorite Color:	
Child's Interests:			
Child's Name:		Age by Christmas:	Sex:_
Sizes: Shirt:	Pants:	Undergarments/Diapers:	
Height:	_ Weight:	Favorite Color:	
Child's Interests:			

Are all children residents of the Central Decatur School District:_____