

SCULLVILLE VOL FIRE COMPANY

REGISTRATION FORM

To be eligible for this program you must be a resident of Egg Harbor Township and provide Proof of Address for you and the children you're requesting toys for (any Mail, School Records, Doctor's Records, Lease, etc). Our age limits are for children 14 years old & under. Please provide Birth Certificates for those children who are not school age.

THIS INFORMATION MUST BE PROVIDED AT TIME OF REGISTRATION

I agree to the following terms:

1. Toys donated by Scullville Vol. Fire Company will not be auctioned, sold or otherwise turned over for monetary donations.
2. Toys donated by Scullville Vol. Fire Company will not be taken out of state for distribution.

I understand any violation of the above agreement will result in disqualification from future donations.

WISH LIST REQUEST

Please note that we will try our best to accommodate all wish list gift requests. Large gift requests, such as TV's, gaming consoles, bikes, etc may not be fulfilled.

We are seeking your help to make this program as successful as possible and fair to all children. Please do not inflate the number of children on your toy request form. We do our very best to make sure each child between the ages of newborn through 14 years receives two toys, one large and one small.

_____ I agree to the conditions of the Scullville Vol. Fire Company Toy Campaign relating to Toy Requests.

RECEIPT OF TOYS

Toys will be distributed in one of two ways:

1. Toy recipient will pick up the toys for Scullville Vol. Fire Company Station #2, 1708 Somers Point Mays Landing Road, Egg Harbor Township on _____.
2. Santa will deliver toys to recipient's home via Firetruck on the following date _____.

I agree to all terms of the Scullville Vol. Fire Company Toy Drive:

Signature

Date

Contact us via email: toydrive@scullvillefire.org or on Facebook: <https://facebook.com/Scullvilletoydrive>

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REGISTRATION FORM

DATE: _____

MALE FEMALE

NAME: _____ DATE OF BIRTH: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE NUMBER: _____ CELL: _____

SSN: _____

EMAIL ADDRESS: _____

FAMILY MEMBERS IN THE HOME:

NAME	DOB	AGE	RELATIONSHIP	RACE/WTHNICITY

RACE/ETHNICITY

African American

Hispanic/Latino

Caucasian (Non-Hispanic)

Asian

Multicultural

Other

AGE

16-29

30-45

49-59

60+

EMPLOYEMENT STATUS

Full-Time

Part-Time

Unemployed

Student

Unknown

HOUSEHOLD INCOME

\$0-10,000

\$10,000-25,000

\$25,000-40,000

\$60,000-more

Unknown

What is the primary language spoke in the household: _____

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CHRISTMAS WISH LIST

Parent/Guardian: _____

1. **Child's Name:** _____

Child's Sex: _____ Child's Age: _____

Child's Clothing Size: Top: _____ Bottom: _____

Child's Shoe Size: _____

List 3 to 4 Wish List Items*(Please note, wish list requests are NOT guaranteed. We will try our best to fulfill all wishes.)

1. _____

2. _____

3. _____

2. **Child's Name:** _____

Child's Sex: _____ Child's Age: _____

Child's Clothing Size: Top: _____ Bottom: _____

Child's Shoe Size: _____

List 3 to 4 Wish List Items*(Please note, wish list requests are NOT guaranteed. We will try our best to fulfill all wishes.)

1. _____

2. _____

3. _____

3. **Child's Name:** _____

Child's Sex: _____ Child's Age: _____

Child's Clothing Size: Top: _____ Bottom: _____

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Child's Shoe Size: _____

List 3 to 4 Wish List Items*(Please note, wish list requests are NOT guaranteed. We will try our best to fulfill all wishes.)

1. _____

2. _____

3. _____

4. **Child's Name:** _____

Child's Sex: _____ Child's Age: _____

Child's Clothing Size: Top: _____ Bottom: _____

Child's Shoe Size: _____

List 3 to 4 Wish List Items*(Please note, wish list requests are NOT guaranteed. We will try our best to fulfill all wishes.)

1. _____

2. _____

3. _____

5. **Child's Name:** _____

Child's Sex: _____ Child's Age: _____

Child's Clothing Size: Top: _____ Bottom: _____

Child's Shoe Size: _____

List 3 to 4 Wish List Items*(Please note, wish list requests are NOT guaranteed. We will try our best to fulfill all wishes.)

1. _____

2. _____

3. _____