

Pagans In Need
2018 Application for Secret Santa Program

Name: _____ Date: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: (home) _____ (cell) _____ (work) _____

E-mail: _____

Preferred Method of Contact: Call Email Text Letter

Occupation: _____ Employer: _____

How did you hear about us? _____

Are you signing up for someone else? Y N

If yes, family name: _____

Number of Family Members: _____ Adults: _____ Children: _____

What do you want assistance with? (circle all that apply)

Food Toys Clothes Other: _____

Are there any allergies we should be aware of?

Any other food restrictions, preferences, or dislikes we should know about?

How would you like to receive your Yule? Pick-Up Dropped-Off Picked up by third party?

Staff Notes:

Office Use:

Family Number: _____

This sheet will be used by PIN-Lansing to assign codes to each person, so please use names when filling this application out. This will ensure the right gifts go to the families they were purchased for. Thank you.

Please write 2-3 items under \$25 for each family member. Please be advised, requesting an item does not guarantee you will receive that item. They are only to serve as suggestions for donors. We are asking that your three items fit these categories: something to wear, something to read, and something to enjoy. (Use back if necessary.)

| Unique Number(for office use only) | Name | Age | Sex (M/F) | Clothes Size | Requests Please list 3 items <u>under</u> \$25 for each member of your family. |
|------------------------------------|------|-----|-----------|--------------|---|
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Approved/Denied/reason: _____

Date: _____

Person picking up/dropping off: _____

Date & Time: _____

Office Use:

Family Number: _____

Secret Santa Program Disclaimer

This is PIN's fourth year providing Yule for families. We are still in the process of making our connections in the community with new and past organizations. We would love to help all of those who are in need, but we may not always be able to keep up with the growing requests for assistance. Our hope is that we continue to grow within the community, and with this growth will come the connections that will help us assist more people. We hope you understand that PIN-Lansing may be unable to provide meals and gifts for every family and individual that applies. Only those who have fully completed their application (i.e. those with all required documents on file) will be considered on a first come, first-served basis. All determinations will be made by November 7, 2018. PIN abides by all Federal and State anti-discrimination laws. No person shall be discriminated against based on race, sex, age, religion, ethnic background, marital status, sexual orientation or disability.

Secret Santa Program Rules

- 1.) All individuals/families requesting assistance must complete and return the application. Failure to do so will result in an automatic disqualification from the Secret Santa Program for this holiday season. All applications and supporting documents must be turned in or postmarked by November 1, 2018.
- 2.) Completed forms and supporting documents can be emailed to admin@pagansinneed.org or sent to
PIN
5655 S. Washington Ave.
Lansing, Michigan 48911
- 3.) All individuals/families requesting assistance must have proof of residency.
- 4.) Federal Guidelines for poverty will be used to determine eligibility for help
- 5.) All individuals requesting assistance must bring 2017's Taxes (AGI Line), proof of unemployment, or proof of inability to work. Social security numbers on all documentation must be obscured from view in one form or another (i.e. blacked out) this is to protect the privacy of individuals/families requesting help.
- 6.) All applicants who have spoken with a representative of PIN-Lansing and have provided all required documentation, will be notified of their eligibility by phone or email on/before November 7th, 2018.
- 7.) You may request assistance for both food and gifts.
- 8.) Denials will be based on the following:
 - Falsification of information, such as inaccurate address or household information.
 - Another agency has already agreed to assist you.
 - Inability to demonstrate financial need/hardship.
 - Received assistance last year and/or our requests for aid has exceeded our current resources.

I have read, and understand, the Secret Santa Program Disclaimer and Rules.

Client Signature

Name Printed

Date