

Date



Toys For Tots Application

Name: Please Print	SS#:			
Address:	Phone:			
City:	Zip: # in Fan	nily:		
Agency:	Email:			
Please Print	Last 5 digits			
FIRST NAME LAST NAME	SS#	AGE	BOY	GIRL
	XXX-X -			
	TOTAL # BO	YS TO	TAL # GIRL	S
, do hereby autho	orize United Way of South Central I	Nebraska to dis	sclose to an	ı y
community group or agency information pertaini assistance.	ng to myself and/or any of the abo	ve named rega	rding holid	ay
Date				

Requirements

- 1. Children must be 14 years old or younger and reside with you in Adams, Clay, Nuckolls or Webster counties to be eligible.
- 2. LATE REGISTRATION (after December 4th) WILL BE WAIT LISTED AND WE CANNOT GUARANTEE YOU WILL BE SERVED.
- 3. Application does NOT guarantee qualification and all applicants will be verified.
- 4. Intentional duplications or submission of fraudulent information will result in immediate elimination from the program.
- 5. Approval e-mails for individuals who registered prior to December 4th will be sent BEGINNING Tuesday, December 5th. If you do not receive an email by December 8th, please contact Audra 402-461-8412.