**** **Back to School Event**

Applications Due by August 24, 2020

**Due to COVID 19 ONLY ADULT Volunteers will be able to participate in this year’s *Dress a Child* event.**

**PARENT INFORMATION**

LAST NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_FIRST\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Nick Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PRESENT ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street City ST Zip

PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Home □ Cell □ Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Alternative Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name Phone

CURRENT EMPLOYER OR SCHOOL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HOUSEHOLD INCOME-TOTAL PER MONTH: **(complete other side)**

**Backup documentation must be presented at the United Way Office.**

**Youth Participants**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| NAME | Date of Birth |  Relationship | Social Security | Grade |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Referred by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ *I hereby authorize United Way of Butte and Anaconda to take and use my Child’s picture for use by the United Way in brochures, local promotions & presentations.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent /Guardian Date

Applications will be accepted at the United Way office, by appointment or email. If hand-delivered the parent /guardian must call 782-1255 for admittance. If emailed ***the application, financial backup documentation and size chart*** must be included for registration to be finalized. If all 150 slots are filled before the deadline, we will establish a waiting list.

MONTHLY SOURCES OF INCOME:

* Payroll $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Independent contractor $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Child Support $­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* SSI $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Other Governmental $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Unemployment $­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Other $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TOTAL MONTHLY INCOME: $­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Copy of Parent/Guardian’s Drivers license □ Children’s Social Security card(s) □

Due to COVID 19 ONLY ADULT VOLUNTEERS will be able to participate in this year’s *Dress a Child* event. The volunteers will use

 the information below to shop for your child. You are asked to fill out the following information, as accurate as possible, so that your child will receive their new clothing to begin this year’s school year.

Children will receive a gift bag with their clothing inside.

THIS INFORMATION IS ESSENTIAL TO PROVIDE ACCURATE SIZING, BEING THAT WE WILL NOT HAVE YOUR CHILD PRESENT TO TRY ON THE CLOTHING

Child’s First Name Girl G Boy

Child’s Age Child’s Grade this fall

Color Preferences

Character Preferences: (Frozen, Avengers, Trolls, Avengers etc.)

Height \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIZES:

Shoe Size: Child Youth Adult

Pant Size: Child Youth Adult

Shirt Size: Child Youth Adult

Coat/Sweatshirt Size

Dress Size

(for UWBA purposes only) Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_