**** ***Dress A Child Event***

Applications Due by August 19, 2022

**Must be returned to the United Way Office.**

Unless COVID 19 numbers significantly increase

**Volunteers will take the children shopping for the 2022 *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 must be returned to the United Way office, located in the Butte Plaza Mall or by email. Office hours are 10am to 1pm. For later hours please call 782-1255 for an appointment. If emailed ***the application, financial backup documentation and size chart*** must be included for registration to be finalized. If all 120 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: $­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

MUST HAVE: (We can make copies)

Copy of Parent/Guardian’s Photo ID □ Children’s Social Security card(s) □

OPTIONAL (to be used for grant applications and funding reports. Info will only be seen by office staff. Names never reported.)

 Asian Black Hispanic Native American Pacific Islander White

You will be asked to bring your child

Either the 24th or the 25th of August.

Children go shopping without Parents.

THIS INFORMATION IS ESSENTIAL TO PROVIDE ACCURATE SIZING TO ASSIST THE VOLUNTEERS HELPING YOUR Child WITH THEIR PURCHASE.

Child’s First Name Girl G Boy

Child’s Age Child’s Grade this fall

Color Preferences

Character Preferences: (Frozen, Mine Craft, etc.)

Specific information: (no jeans, briefs of boxers, bra size etc.)

SIZES:

Shoe Size: Regular or Wide Child Youth Adult

(Includes Socks) (Please circle)

Pant Size: Slim, Regular or Husky Child Youth Adult

(Includes Underwear) (Please circle)

Shirt Size: Child Youth Adult

Coat/Sweatshirt Size Child Youth Adult

Dress Size Child Youth Adult

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