



Tools for School



Application for School Supplies

PLEASE COMPLETE ALL INFORMATION

Student Name _____ Birthdate _____

Father/Guardian _____ Birthdate _____

Mother/Guardian _____ Birthdate _____

Mailing Address _____

City/State/Zip _____ Email _____

Contact/Message Phone Number _____

Student's School _____ Grade in 2019/20 _____ Gender: ___ Male ___ Female

Parent/Guardian Signature _____ Application Date _____

IMPORTANT MESSAGE: Please note that this application will be processed by Afloat Ministries and your information will be stored and secured in our office.

I will pick up my Student's School Supplies at: (please check one)

- _____ Sacred Heart Gym, 2405 5th St, Tillamook August 17, 2018, 10:00am to 1:00pm
- _____ Sacred Heart Gym, 2405 5th St, Tillamook August 19, 2018, 2:00pm to 6:00pm
- _____ Garibaldi Library, 107 6th St, Garibaldi August 17, 2018, 2:00pm to 5:00pm
- _____ NVSD #101 District Office, 36925 Hwy 101 S, Cloverdale August 21, 2018, 10:00am to 2:00pm

Return your completed Application by July 12th to one of the following:

Mail to:	Tools for School c/o Afloat Ministries PO Box 954 Tillamook, OR 97141	Drop off at:	Afloat Ministries 115 Main Ave #5 (put in #5 Mailbox) Tillamook, OR 97141
----------	--	--------------	--

PLEASE DO NOT RETURN YOUR APPLICATION TO YOUR SCHOOL!

Completion of this Application is **REQUIRED** to receive School Supplies. No applications will be taken over the phone.

Please complete **only one** application per child. Thank you.

Do you currently receive the following?

_____ SNAP (Food Stamps) _____ Food Pantry

Did you receive a Thanksgiving Box or Christmas Box in 2018? _____ YES _____ NO