



Dear Parent or Guardian,

CrossNet Ministries is excited to be sponsoring the Christmas Gift Giving Program again this year! CrossNet will be handling all your requests and wish list submissions.

Basic Enrollment Information:

To enroll your family in the Christmas program, please fill out the bottom portion of this **Family Information Form** and a **Christmas Wish List** for each child and return it no later than November 7. All children in the household are invited to participate in the program. The age range is from birth to 18 years old. If a child is older than 18, they may participate in the program if they are still in high school. **Please note this program is for families enrolled in the FREE lunch program in the ELANCO School District only.*

Paperwork Details:

- One **Family Information Form** (bottom portion only) per family
- One **Wish List Form** for each child in your family
 - Feel free to make copies for each of your children, or stop by the office for additional forms.
- Print clearly so we can read your name & phone number. If your information changes, contact us ASAP!
- Return all information in envelope provided in back to school mailing
- Or drop-off your paperwork at our office at 123 W. Franklin St, New Holland, PA 17557
- When we receive your forms in the mail, we will contact you to let you know we have received it.

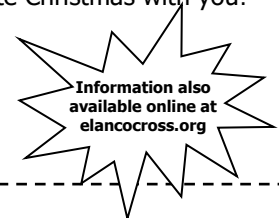


Event Information:

- Christmas gift pick up event is held on **Saturday, December 14**, between 10:00 AM and 4:00 PM.
- All gifts must be picked up at CROSSNET MINISTRIES during the one-day gift pickup event. We will not deliver.
- A pickup voucher will be mailed with an assigned pickup time by December 6. There are morning, mid-day and afternoon pickup times. We cannot give you your gifts without this voucher.
- If you need transportation, please make arrangements ahead of time for a ride or assistance to get your gifts.
- At the event, you will have an opportunity to wrap your gifts for free, get stocking stuffers and enjoy special treats.
- Note this event is for parents/guardians only and **not** children; we want them to have a Christmas surprise!

Contact me with any questions at lisa@elancocross.org or at 717-355-2454. I am excited to celebrate Christmas with you!

Sincerely,
Lisa Kerstetter
Director of Marketing & Events



Cut off and return bottom portion only – keep the top for your records!

FAMILY INFORMATION FORM

Parent/Guardian Name: _____ Date: _____

Cell Phone: _____ Alternate Phone: _____

Home Address: _____

Please print your mailing address clearly – this is what we will use to mail out your gift vouchers.

Names and Ages of Children: Please print clearly (children eligible from birth to last year in high school)

Name	Age	Name	Age
1.		5.	
2.		6.	
3.		7.	
4.		8.	

I, the undersigned, as of the date above, authorize CrossNet Ministries, its employees or its agents, to release my name, or the names of my family members to a church, school, business or service organization for the typical purpose of that organization. I waive all rights or confidentiality for said release. I agree to hold CrossNet Ministries harmless for all the consequences arising from this release.

Parent/Gaurdian Signature: _____