



## Christmas Help for our Heroes Families

### Request for Charity Care:

Dear Veteran, Police Officer or Firefighter and Family:

In keeping with our mission and core values, we are committed to providing care for our heroes regardless of their ability to pay. We help with Christmas for our Heroes family.

Our Charity Care/Financial Assistance: apply for financial assistance by completing and returning this form.

Name: \_\_\_\_\_ Rank \_\_\_\_\_

Branch of Service: \_\_\_\_\_ Number of years of Service: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### Family information:

Number of children in home: \_\_\_\_\_

Please circle sex of child along with first name of children;

Child one: Boy or girl \_\_\_\_\_ age: \_\_\_\_\_ Cloth Size: \_\_\_\_\_

Child two: Boy or girl: \_\_\_\_\_ age: \_\_\_\_\_ Cloth Size: \_\_\_\_\_

Child three: Boy or girl: \_\_\_\_\_ age: \_\_\_\_\_ Clothes Size: \_\_\_\_\_

Child Four: Boy or girl: \_\_\_\_\_ Age: \_\_\_\_\_ Clothes Size: \_\_\_\_\_

Child Five: Boy or girl: \_\_\_\_\_ Age: \_\_\_\_\_ Clothes Size: \_\_\_\_\_

How many total in family; \_\_\_\_\_

What kind of help do you need for the Holiday?

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