

# Sponsor Form 2017 Christmas Hampers



Sponsor's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone No: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Email: \_\_\_\_\_

Choice of Family Size:

Single Person     Family (1-2 Children)     Family (3-4 Children)     Family (5+)

Tax Receipt Requested?                       Yes     No

*(If donation is composed of purchased goods, then purchase receipts are required for valuation purposes)*

Please mail or drop off receipts to 9815 - 140 St., Surrey, BC V3T 4M4

## OFFICE USE ONLY

Referring Worker: \_\_\_\_\_

Program: \_\_\_\_\_

Phone No: \_\_\_\_\_ Email: \_\_\_\_\_

Family Sponsored:

Please email completed applications to [debbie.perkes@options.bc.ca](mailto:debbie.perkes@options.bc.ca)

Referring Worker will be in contact with you regarding any additional family information required and/or arranging delivery between Dec 8<sup>th</sup> and 20<sup>st</sup>.

You may also contact the worker if you have any questions regarding the family you have sponsored.