



# Christmas Hampers Sponsor Form



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+)

Do you want a Tax Receipt?     Yes     No

The tax receipt should be made out to :     same as above or,

Full Name: \_\_\_\_\_

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

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

Please scan or take a picture of your purchase receipts and email to [debbie.perkes@options.bc.ca](mailto:debbie.perkes@options.bc.ca)

Charitable Registration #811786227 RR0001

## 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 4<sup>th</sup> and 15<sup>st</sup>.
- You may also contact the worker if you have any questions regarding the family you have sponsored.