

# Valley County

## “Make Christmas Happen”

Volunteers would like to help make Christmas happen for you and your family if you are unable to do so. Donations received from Valley County community residents, businesses and local organizations are used to prepare holiday bundles of health essentials and gifts for children. Food items will not be included but if funding is available, there may be food vouchers.

Tags, listing suggested gifts for each child (ages birth to 18), are anonymously placed on the “Giving Tree” at the Ord Township Library. These tags indicate the age, gender, and gift suggestions you have listed on the following page. We recommend that you make suggestions of items that are \$25 or less. Every effort is made to provide a bundle for all families participating.

**If you are interested in participating  
COMPLETE THE FORM & RETURN BY  
TUESDAY, NOVEMBER 25th**

**TO:**

**The Ord Township Library 1718 M Street, Ord NE**

Forms can be placed in the drop box by the front door if the Library is not open.

**Keep this letter as a reminder.**

Your holiday bundle must be picked up on:  
Monday, December 22<sup>nd</sup>  
at The Ord Township Library  
Between 9:00 - 1:00 p.m.

If you are unable to pick up at this time, someone else may do so for you, but that must be communicated BEFORE the pickup date!  
Make arrangements with the Library - 728-3012.

# MAKE CHRISTMAS HAPPEN – REGISTRATION FORM

Complete and return the form by Tuesday, November 25th to:  
The Ord Township Library - 1718 M Street, Ord NE 68862

**A health essentials bundle (tissue paper, tooth paste, soap, etc)  
can be provided for each household.**

YES, I want the health essentials\_\_\_\_\_ NO, I do NOT want the health essentials\_\_\_\_\_

## LIST ALL MEMBERS THAT LIVE IN YOUR HOUSEHOLD

ALL ADULTS (Ages 18+ - living in the the same household):

### NAME

Adult #1\_\_\_\_\_

Adult #2\_\_\_\_\_

Adult #3\_\_\_\_\_

Adult #4\_\_\_\_\_

## ALL CHILDREN (Ages birth to 18 - living in the household):

\* Please make Gift Suggestions or List Special Interests (\$25 or less) for each child below. PRINT CLEARLY.

### NAME

### MALE or FEMALE

### AGE

Child #1\_\_\_\_\_

Gift Suggestions:\_\_\_\_\_

Child #2\_\_\_\_\_

Gift Suggestions:\_\_\_\_\_

Child #3\_\_\_\_\_

Gift Suggestions:\_\_\_\_\_

Child #4\_\_\_\_\_

Gift Suggestions:\_\_\_\_\_

Child #5\_\_\_\_\_

Gift Suggestions:\_\_\_\_\_

Child #6\_\_\_\_\_

Gift Suggestions:\_\_\_\_\_

Child #7\_\_\_\_\_

Gift Suggestions:\_\_\_\_\_

Child #8\_\_\_\_\_

Gift Suggestions:\_\_\_\_\_

If you have more children living in your household, include them on the back of this paper.

**Signature:** \_\_\_\_\_ **Print Name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Address:** \_\_\_\_\_ **Town:** \_\_\_\_\_

By signing this form I am confirming that I live in Valley County and I authorize the release of my name and information to Make Christmas Happen volunteers.