## Wilkes County Kids Christmas Toy Drive Application

Parent/Guardian Name:				W SA SA
*Must be person picl	king up t	oys. Photo I	D required at pickup!!*	CHAISTMAS TOY OR THE
Street Address: Phone N			mber:	
			-	
*Number must be val	id so we	can contact y	you if needed* *AGE LII	MIT IS 11*
Name	Age	Gender	Wish List	Hobby/Favorite
			(please include sizes if requesting clothes, diapers, etc.)	Character/TV Show
•				
*4.5				,
7				
		-		
	-			
	(You may	z continue or	the back of this page if more space is ne	eded)
Applications are due	Decemb	er 6, 2024 b	y 5 PM at the Wilkes County EMS Mai	in Station
**LATE APPLICAT	TONS W	TLL NOT E	BE ACCEPTED**	
Pickup will be Sunday	, 12/22/2	024 at the Po	ope Center in Washington.	
Last Names A-M is fro	om 1-3 pi	m & N-Z is f	from 3-5 pm. *DO NOT BE LATE*	
			not multiple times by multiple family m Please sign below indicating that you un	
Parent/Guardian Sig	nature:	/		

Main Station Address: 105 Marshal St. Washington, Ga 30673

For questions, please contact Wilkes County EMS at 706-678-7837