

**Greater Attleboro Area Council for Children, Inc**  
**Please fill out one story sheet for each child (Please Print)**

File # \_\_\_\_\_

**KID -**

**1**

(circle one)

Child's First Name Only \_\_\_\_\_ Male Female Age \_\_\_\_\_ Date of birth \_\_\_/\_\_\_/\_\_\_ Grade \_\_\_\_\_

Child's Toy wish: **1 ITEM**  
**No toys over \$75, no bikes, violent toys or toy weapons, computers, video game systems, TV's or tablets.**  
**No electronics for children under 4.**  
**No requests for gift cards for children under 13.**

1 Item: \_\_\_\_\_

**FOR CHILDREN 12 AND YOUNGER:**

Does this child need a winter coat? No \_\_\_\_\_ Yes \_\_\_\_\_ size \_\_\_\_\_  
 Does this child need winter boots? **(18m and older)** No \_\_\_\_\_ Yes \_\_\_\_\_ size \_\_\_\_\_  
 Does this child need pajamas? No \_\_\_\_\_ Yes \_\_\_\_\_ size \_\_\_\_\_  
 Choose **1 OTHER CLOTHING ITEM:** \_\_\_\_\_ size \_\_\_\_\_

**FOR CHILDREN 13 AND OLDER:**

Favorite Store: \_\_\_\_\_ Color preference: \_\_\_\_\_  
 Choose **1 CLOTHING ITEM:** \_\_\_\_\_ size \_\_\_\_\_

What book/author/type of book does the child like? (Please don't give us a book title the child already has): \_\_\_\_\_  
 Reading level grade: \_\_\_\_\_ **(For CIFK use: USB request: Y / N)**

Doll Preference: Caucasian Hispanic African American Asian

Access to a Computer? Yes No  
Access to MP3 Player? Yes No If yes, is it an iPod? Yes No  
Access to DVD Player? Yes No  
 Video game system currently owned: \_\_\_\_\_

**PLEASE USE THIS CHART TO FILL IN CLOTHING SIZES ABOVE.**

Type	Size
Infants:	0, 3, 6, 9, 12, 18, 24 months
Child:	2T, 3T, 4T, 5, 6, 6X, 7, 8, 10, 12, 14, 16 Husky, Slim, Regular
Juniors:	1, 3, 5, 7, 9, 11, 13, 15
Young Men's:	14-16 18-20 Husky, Slim, Regular
Women's:	S M L XL XXL XXXL
Men's:	S M L XL XXL XXXL

**Please tell us more about your child so that we can make the best choices for your child to add items other than what is noted above:**

What are your child's hobbies, special interests or activities?  
 \_\_\_\_\_

Favorite sport and teams; action figures; arts and crafts, etc: \_\_\_\_\_

Does your child have any special needs or unique requirements that a donor should know about when choosing gifts? If yes, please elaborate. \_\_\_\_\_

**Please Do Not Write Below This Line: Office Use Only**

**J E GC**

Donor Information Name	Address	Phone	e-mail
Toy Donor: _____	_____	_____	_____ TY
Toy Donor: _____	_____	_____	_____ TY
Date: _____	Phone Elf: _____	e-mail sent? { }	
donor total # of children matched: _____			

Name	Address	Phone	e-mail
Clothing Donor: _____	_____	_____	_____ TY
Clothing Donor: _____	_____	_____	_____ TY
Date: _____	Phone Elf: _____	e-mail sent? { }	
donor total # of children matched: _____			

# Bag Started?

# QC elf:

Toy Received (including gift certificates & electronics)				Clothing Received			
From Donor (check-mark only)	From CIFK	Item	# of items	From Donor (check-mark only)	From CIFK	Item	# of items
✓		<b>List other items:</b>		✓		<b>List other items:</b>	
	\$	Action figures			\$	2-Piece Outfit	
	\$	Balls (soccer, basketball, football)			\$	Boots	
	\$	Barbie / Bratz / Monster High			\$	Coat (w/ hat, gloves/mittens, scarf)	
	\$	Board Games			\$	Dress	
	\$	Book			\$	Jeans/Pants	
	\$	Cars / trucks			\$	Infant layette	
	\$	Coloring books / crayons / markers			\$	Pajamas	
	\$	Crafts			\$	Shirt	
	\$	Dolls			\$	Shoes	
	\$	Legos			\$	Socks	
	\$	Puzzle			\$	Sweater	
	\$	Stuffed animal			\$	Sweatshirt / hoodie	
	\$	Other:			\$	Sweatpants	
	\$	Other:			\$	Underwear	
	\$	Other:			\$	Other:	
	\$	Other:			\$	Other:	
	\$	Other:			\$	Other:	
	\$	Other:			\$	Other:	
	\$	Other:			\$	Other:	
	\$	Other:			\$	Other:	
	\$	Other:			\$	Other:	
	Total Spent by CIFK: \$				Total Spent by CIFK: \$		

In bag (only if bag is completed)

JEWELRY: \$	Yes	No
GIFT CARDS: \$	<b>NO</b>	
ELECTRONICS: \$	Yes	No

<b>TOTAL FROM DONOR: \$</b>
<b>TOTAL FROM CIFK: \$</b>

NOTES: