



2023 Sharing & Caring Holiday Need Form

The Sharing and Caring Program sponsored by Sharon Springs Central School Faculty and Staff is once again providing assistance to those households in need for the Holiday Season. This year the program will be providing food baskets to families in need. Additionally, the program is offering to provide essential clothing to eligible children residing in the household ages **Birth-19 years old**. If your family has a need and meets the following requirements, please fill out the form below and **return to the Main Office no later than December 7th, 2023.**

- * A Resident of Sharon Springs Central School District.
- * Have school aged children living in your household.
- * One (1) application, one basket per household.
- * You must include a contact phone number and email address.
- * Application deadlines will be strictly adhered to – NO EXCEPTIONS.
- * **DEADLINE to submit: Thursday, December 7th by 3:00pm to the MAIN OFFICE**
- * **PICK DAY/TIME: TUESDAY, DECEMBER 19th, 2023- 7:30AM-4:45PM**
- * If you have questions, please contact Michelle Keaney, 518-284-2266 ext. 106 or email mkeaney@sharonsprings.org

Family Household Name: _____

Contact Phone Number: _____ **Email Address:** _____

Does your family need a Food Basket? YES NO

Would you like to request essential clothing for your children residing in the household? YES NO

IF YES- COMPLETE THE INFORMATION BELOW & REVERSE

The Sharing & Caring Program will do their best to meet needs, however please indicate by circling the items that are of **GREATEST** Need.

Child #1 First Name: _____ **Age:** _____ **Male** ____ **Female** ____

Indicate Clothing Size Category for each needed item:
INFANT TODDLER CHILD/YOUTH ADULT

Coat	Snow Pants	Jeans/ Pants	Shirt/ Top	Sneakers	Socks	Boots	Gloves/ Mittens	Underwear
Size:	Size:	Size:	Size:	Size:	Size:	Size:	Size:	Size:
Category:	Category:	Category:	Category:	Category:	Category:	Category:	Category	Category

Additional children please list on the reverse side

Child #2 First Name: _____ **Age:** _____ **Male** ____ **Female** ____

Indicate Clothing Size Category for each needed item:
INFANT TODDLER CHILD/YOUTH ADULT

Coat	Snow Pants	Jeans/ Pants	Shirt/ Top	Sneakers	Socks	Boots	Gloves/ Mittens	Underwear
Size:	Size:	Size:	Size:	Size:	Size:	Size:	Size:	Size:
Category:	Category:	Category:	Category:	Category:	Category:	Category:	Category	Category

Child #3 First Name: _____ **Age:** _____ **Male** ____ **Female** ____

Indicate Clothing Size Category for each needed item:
INFANT TODDLER CHILD/YOUTH ADULT

Coat	Snow Pants	Jeans/ Pants	Shirt/ Top	Sneakers	Socks	Boots	Gloves/ Mittens	Underwear
Size:	Size:	Size:	Size:	Size:	Size:	Size:	Size:	Size:
Category:	Category:	Category:	Category:	Category:	Category:	Category:	Category	Category

Child #4 First Name: _____ **Age:** _____ **Male** ____ **Female** ____

Indicate Clothing Size Category for each needed item:
INFANT TODDLER CHILD/YOUTH ADULT

Coat	Snow Pants	Jeans/ Pants	Shirt/ Top	Sneakers	Socks	Boots	Gloves/ Mittens	Underwear
Size:	Size:	Size:	Size:	Size:	Size:	Size:	Size:	Size:
Category:	Category:	Category:	Category:	Category:	Category:	Category:	Category	Category

Please use an additional form if you have more than 4 children in your household. Contact Michelle Keaney at (518) 284-2267 x106 by phone or email mkeaney@sharonsprings.org for additional forms.

Completed Forms need to be turned into the Main Office by 3:00pm on THURSDAY, DECEMBER 7th.