



Providing holidays to children since 1949 Serving the counties of York, Cumberland, Sagadahoc, Lincoln, Knox, and Androscoggin



**DEADLINE: November 20, 2022**  
**SUBMIT BY MAIL ONLY**  
**\*\*\* TF COVID REQUIREMENT\*\*\***

Application for gifts, please fill out ALL parts of this application.  
Each child, 16 and under, in your custody, will receive only one set of gifts from the Toy Fund.

**APPLICATIONS WILL NOT BE PROCESSED WITHOUT EACH PERSON'S FULL BIRTHDATE**

**PART I: Family information (Gifts will be provided only to one parent or legal guardian)**

Your last name \_\_\_\_\_ First name \_\_\_\_\_  
 Your BIRTHDATE: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_ (applications will not be processed without each person's full birthdate)  
 Mailing address \_\_\_\_\_ City \_\_\_\_\_ zip \_\_\_\_\_  
 Telephone \_\_\_\_\_

*I understand that I may be contacted by the Toy Fund staff to verify or clarify information, phone info required.\**

Marital status (circle one):      Single      Married      Other \_\_\_\_\_

Please list all children living with you and in your custody. If you have more than four children, please write the same information for additional children on the back of this form.

Birthdate (must be completed):	Last Name	First Name	Relationship	Gender
Month _____ Day _____ Year _____	_____	_____	_____	_____
Month _____ Day _____ Year _____	_____	_____	_____	_____
Month _____ Day _____ Year _____	_____	_____	_____	_____
Month _____ Day _____ Year _____	_____	_____	_____	_____

**Part II Statement of need (REQUIRED):**

- A) Please tell us, in two or three paragraphs, about yourself and your family and why you are in need of help from the Press Herald Toy Fund this year. Please write this information on the back of this form.
- B) Please write your family monthly income and expense information below:  
 Monthly Income \$ \_\_\_\_\_ Monthly Expenses \$ \_\_\_\_\_
- C) I have determined, that due to my financial circumstances, I need assistance from the fund. I agree that all gifts received will be given to the children listed in this application and not used for any other purposes. After your application is processed, you will receive a letter telling you when and where to pick up the toys.

Mail to: **Press Herald Toy Fund**  
 295 Gannett Drive  
 South Portland, ME 04106  
 207-791-6672

\_\_\_\_\_  
 Signature / Date

**Part III: Privacy Release**

By checking this box, I give permission for my application to be shared with reporters from the Portland Press Herald/ Maine Sunday Telegram for possible reference/inclusion in a Toy fund story. I understand that if I check this box, I may be contacted by phone by a reporter.

Privacy Release Signature \_\_\_\_\_ Date \_\_\_\_\_

The Portland Press Herald Toy Fund in the Spirit of Bruce Roberts, is a non-profit organization supported by the Portland Press Herald/ Maine Sunday Telegram. The Toy Fund solicits money from readers and uses the money to buy new gifts for underprivileged children who live within the counties listed at the top of this form. (2022)