Women That Give

Driving Change By Giving Back

CHRISTMAS GIFT DRIVE REQUEST FORM

This form helps Women That Give prepare age-appropriate gifts for children and families. Tell us about each child's interests and preferred gifts. All requests depend on available donations.

Campaign: Christmas Gift Drive 2026 **Date:** _____

Preferred Contact: ☐ Phone ☐ Text ☐ Email **City:** _____

Preferred Language: _____

Parent / Guardian / Client Information

Full Name: _____ **Phone Number:** _____

Email Address: _____ **Alternate Phone:** _____

Home Address: _____

Postal Code: _____ **Number of Children:** _____

Children Requesting Gifts

List each child, including their age and a few favourite interests or gift ideas.

Child First Name	Age	Interests / Hobbies	Preferred Toy or Gift	Clothing Size (optional)

Gift Categories

Select the types of gifts your children might enjoy (specify by child on page 2).

☐ Educational toys ☐ Dolls / plush toys ☐ Cars / action figures

☐ Building toys / LEGO ☐ Arts and crafts ☐ Books / colouring

☐ Games / puzzles ☐ Sports items ☐ School supplies

☐ Clothing / accessories ☐ Other gifts ☐ No preference

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Individual Gift Preferences

Use the space below for specific requests or items to avoid. Gifts cannot be guaranteed.

Child First Name	Favourite Interests / Gift Ideas	Items to Avoid / Special Considerations

Optional Family Gift Preferences

If adult gifts are available, which items would your household appreciate?

- ☐ Personal care sets
- ☐ Warm accessories
- ☐ Books
- ☐ Household items
- ☐ Gift cards
- ☐ Other

Other preferences: _____

Pickup and Communication Details

Can you pick up gifts at a designated distribution location? ☐ Yes ☐ No ☐ Unsure

Best days / times to contact you: _____

Transportation or accessibility considerations: _____

Important Notes

Gifts are subject to availability, and specific gift requests cannot be guaranteed. Families will be contacted with distribution details if gifts are available. Information about children is collected only to coordinate suitable gifts.

Consent

I confirm that the information provided is accurate. I consent to Women That Give using this information to assess my request and contact me about this campaign. I understand that completing this form does not guarantee assistance.

Parent / Guardian Signature: _____ **Date:** _____