



Wiscasset 2018 Application for Spirit of Giving Wish List

Family Name: _____

Address: _____

Phone: _____

- Please fill out the following information for **each** member of the household aged 18 and under.
- List two items they need such as clothes and then two wish items, **(NO ELECTRONICS)**.
- Applications are due back to the Wiscasset Town Office or Community Center by **November 15**.
 - Gifts are to be picked up at Wiscasset Town Office **December 13 from 3 to 5 p.m.**
 - The gifts will **NOT** be wrapped.

PLEASE PRINT

Name of Child: _____

Age: _____ Circle - Male or Female

Sizes are VERY important Coat size: _____ Pant size: _____

Shirt size: _____ Shoe size: _____ Pajama size: _____

NEED List: (Only two items will be considered)

WISH list (Only two reasonably priced items will be considered)

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Age: _____ Circle - Male or Female

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