**New Sponsor/Returning Sponsor Registration Form**

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| **Contact Information:** | | |
| **Name:** | **Organization or Business:** | **Street Address:** |
| **City:** | **Postal Code:** | **Phone (day):** |
| **Phone (after business hours):** | **Fax:** | **Email:** |
| **I would like the Family Hamper Profile sent to me by: email**  **fax** | | **New Sponsor**  **Returning Sponsor:** |
| **Hamper Preference:**  **Single Parent**  **Two Parent**  1 child  2 children  3 children  4 children  five + children  **OR**    **Independent Youth** (i.e., teens in the care of the Children’s Aid Society, living independently in school/working)  **I/we would like to provide more than one hamper** *(describe preference re: type of additional hampers):* | | |

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| **Recognition – Individual, Family Sponsors, Businesses, Groups and Organizations** | |
| The Children’s Aid Society may recognize me/my family, on its website or other publications.  **Please indicate how you want your name to be published (e.g., “Smith Family” or “Ann and Gerry Brown”):** | I wish to remain anonymous. |