

# **Jacobson/Quinn Toy Project Application**

This is a community project of the HOLLY AREA YOUTH ASSISTANCE, 920 East Baird Street, Holly, MI 48442 It is for children infant to 18 years of age, who live within the geographic area of the Holly Area School District in Oakland County, Michigan. This project is on a financial need and first come – first serve basis as long as the supplies last. HAYA will do its best to service the qualified local families that apply. For more information, call (248) 328-3181 or email HAYA4kids63@gmail.com. **APPLICATION DEADLINE: MONDAY, DECEMBER 5th, 2022.** 

#### PLEASE PRINT OR TYPE CLEARLY

Parent/Guardian's Last Name		First Name						
		Michigan						
Address	Apt. / Lot#	City	State	Zip Code				
Mobile Home Park-Park Name:		Apartment-Complex Name:						
Municipality (Please check only one):	olly Village 🔲 Holly Twp. 🔲 G	roveland Twp. 🛭 Springt	ïeld Twp.   □ Rose Twp.   □ \	White Lake Twp.				
Phone: ( )	Cellular Phone: ()	Wo	ork Phone: ( )					
Message Phone & Name**		E-Mail:						
**If no phone, please list a phone of someone else with whi	ch we can leave a message for you. Include :	hat person's name and phone num	ber.					
Yes, I grant permission to release this	ate will be on Decem	ber 17 <sup>th</sup> at the Ka	rl Richter Campus					
, ,								
☐ No, please do not share my informa	ation.							

Form Continued on Back 1 of 2

#### PLEASE LIST ALL PEOPLE LIVING IN YOUR HOUSEHOLD. ATTACH AN ADDITIONAL PAGE WITH THIS INFORMATION, IF NEEDED.

This Column For Office Use Only	First Name (Please Include Last Name if Different From Parent)	C=Child A=Adult (Circle one)	Age	Gender (Circle one) M=Male F=Female	Race Ethnicity	Current Grade Level	School Attending	Allergies / Other (i.e. allergic to perfumes, Jewelry metal, etc.; has ears pierced)	Special Needs (or special wishes)	Clothing Sizes
		C A		M F						
		C A		M F						
		C A		M F						
		C A		M F						
		C A		M F						
		C A		M F						

Must meet 2022 INCOME LIMITS established by	f v the U.S. De	epartment of Housing	and Urban Develo	pment (Please CHECK ONE)
		•		`

☐ Family of 2 less than \$57,300; ☐ Family of 3 less than \$64,450; ☐ Family of 4 less than \$71,600;

☐ Family of 5 less than \$77,350; ☐ Family of 6 less than \$83,100; ☐ Family of 7 less than \$88,800;

## **DEADLINE**: Monday December 5th, 2022

### PLEASE RETURN COMPLETED FORM WITH PROOF OF RESIDENCY AND PROOF OF INCOME TO:

HOLLY AREA YOUTH ASSISTANCE 920 East Baird Street, Holly MI 48442 **Attention:** Toy Project

or you can email your application to haya4kids63@gmail.com

\*\*SPECIAL NOTICE: Youth ages 13 thru 18 may receive a local area gift card.

HAYA cannot guarantee that gifts are not on recall lists. Parents / Guardians are responsible for checking gift items as recall lists are updated frequently.

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