

Christmas Children's Blessings Assistance Application

Fill out the form carefully for registration. Due date for application November 23, 2025.

Forms may be mailed to Christmas Blessings, P.O. Box 1036, Farmerville, LA 71241
or dropped off at C&W Tire, 7710 Marion Hwy, Farmerville, LA

Head of Household: _____

Gender: _____ Number of people in your home: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____

Phone Number: _____

Annual Household Income: _____

Adults in Home not attending school (not head of household)

First Name: _____ Last Name: _____

Date of Birth: _____ Relationship to you: _____

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Are there any other needs the family has?

Children in the Home attending school

First Name: _____ Last Name: _____

Date of Birth: _____ Relationship to you: _____

School: _____ Gender: _____

Christmas Gift Wish #1: _____

Christmas Gift Wish #2: _____

Christmas Gift Wish #3: _____

Christmas Gift Wish #4: _____

Clothing Size (please indicate if it is children's size or adult size):

Shirt Size: _____ Pant Size: _____ Shoe Size: _____

First Name: _____ Last Name: _____

Date of Birth: _____ Relationship to you: _____

School: _____ Gender: _____

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