

Please complete the information below and return by Monday, December 2, 2024 (all gifts must be delivered by December 16).

Sponsoring Name		
Contact Person	First Name:	Last Name:
Contact Person 2	First Name:	Last Name:
Street Address		
City, State, ZIP		
Phone Number(s)	Phone 1:	Phone 2:
E-mail Address		

Adopt-a-Teen (Ages 13-17)

- Number of teens we would like to adopt (select from drop down): or #
 - Preferred: Male Female Either
- Other additional custom requests please add in Comments Box below.*

I would like to support the Teen Angel Christmas Adoption Program but prefer not to do the shopping. Please accept my donation to purchase gifts for teens.

**The cost to sponsor a Thanksgiving or Christmas Dinner Basket with all the fixings is \$40.00.*

\$ Check enclosed (Please make checks out to The Salvation Army Traverse City)

Charge my credit card: ☐ Visa ☐ Master Card ☐ Discover ☐ American Express

Card Number: Exp. Date: 3 digit Sec. Code:

Amount: \$ _____ Signature: _____

Please read the following statements and check each, signifying your agreement.

I understand that we as the sponsor will remain anonymous throughout the teen adoption process and will have no direct contact with our assigned adoptees. The Salvation Army will be responsible to distribute our gifts in order to protect the privacy of the individual.

I understand that the adoptees have been screened by The Salvation Army and have all been determined to be in need of assistance.

I understand that the gifts on the list that will be given to me are simply suggestions that have been given by the adoptee. I am not obligated to provide any certain gift, or all of the items listed. (We suggest a value of approximately \$150 per adopted teen.)

Comments:

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[illegible]