The Kiwanis Club of Levittown-Bristol Foundation Inc. Levittown, Pennsylvania 19058

Dear Parents or Guardians,

Even though it seems that the school year has just begun, the holiday season is fast approaching. With the unusual circumstances that are affecting our country again this year, we will require additional time to complete and mail vouchers.

For many years the Kiwanis Club of Levittown-Bristol Give a Christmas Fund has assisted families in need. This fund is a joint venture between the Kiwanis Club of Levittown-Bristol and the

Bucks County Courier Times. Children from Kindergarten to 8th grade are provided with \$35.00 certificates which can be used at participating merchants.

Eligibility will be determined based on financial need. <u>Applications will be honored on a first come</u>, <u>first served basis with a receipt deadline of Friday</u>, <u>October 29</u>, <u>2021</u>.

Please complete the form on the reverse side of this letter at your earliest convenience. If you have several children in school, please complete only one form for all children in your <u>immediate</u> family. Duplicate forms will not be honored. Please write legibly and make sure your address is correctly written with apartment numbers included. It would be helpful if you also included a phone number. If you have unusual financial concerns, you may include a letter of explanation.

The certificates will be mailed to your home. Certificates will be delivered in mid-December 2021.

Completed forms should be returned to the nurse at your child's school.

Best Regards, Levittown-Bristol Give A Christmas Committee

Levittown-Bristol Kiwanis Give A Christmas Fund

| Please Print | | | | |
|---------------------|----------------------------|-----|---------------|----------------------|
| School District | | | | |
| Parent/Guardian Fir | st and Last Name: | | | |
| Street Address: | | | | |
| Apartment Number: | | | | |
| City | State | | _ Zip | |
| Phone Number of P | arent/Guardian: | | | |
| | your children on this form | | | |
| Child's Last Name | Child's First Name | Age | Current Grade | School Child Attends |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

You must return this letter to your child's school.