2026 PIATT COUNTY TOY AND GIFT PROGRAM APPLICATION

PLEASE READ!

1. Your child(ren) must LIVE IN Piatt County, no matter what school they attend.

2. We will send you a confirmation letter. KEEP IT, it has information you will need.

3. *PROOF OF ELIGILIBITY - EXAMPLES: This is your free/reduced lunch letter from your school(s), a copy of state medical insurance card or letter listing your family members, SNAP eligibility letter for family, Public Aid documentation for family, OR other documentation from a social service agency, such as Small Hands Diaper Pantry.*

4. NO APPLICATION ACCEPTED WITHOUT PROOF OF ELIGIBILITY.

MAIL EARLY! Forms MUST BE POSTMARKED BY FRIDAY, OCTOBER 30, 2026, or they'll be returned unopened. We're very sorry, NO EXCEPTIONS.

MAIL APPLICATION TO:

Piatt County Toy & Gift Program, 503 Maple Lane, Monticello, IL 61856.

USE INK TO PRINT CLEARLY AND FILL IN *ALL* INFORMATION:

Parent/Guardian FIRST & LAST Name: _____

HOME Address (Street Address & TOWN): _____

Mailing Address if you have a PO BOX _____

EMAIL ADDRESS: _____

Telephone # (REQUIRED): _____
(We must be able to leave a message! And please check your messages! If you're giving another person's phone number, please note that)

SEND COPY OF PROOF OF ELIGIBILITY WITH THIS APPLICATION!! We keep it.

Name of school providing free/reduced lunches or social service agency providing help:

_____

If you do not receive aid from any source, please supply a copy of your most recent pay stub.

ALL FORMS MUST BE SIGNED & DATED OR THEY WILL BE RETURNED!

DATE: _____ ***SIGNED:*** _____

DON'T FORGET TO SEND YOUR PROOF OF ELIGIBILITY!!!

TURN FORM OVER TO LIST YOUR CHILDREN & GIFT REQUESTS, BE SPECIFIC WITH SIZES, COLORS, BRANDS, ETC. The more info we have, the better!!

Our program is for children ages birth to 17 years old (or 18 if still in school). School-age children must be attending school to be eligible. Babies born before Distribution Day (Nov. 23, 2026) are also eligible. *Clearly print the following*:

Child's FIRST & LAST name Child's age Child's shoe size
Child's sex (some names can be male or female) Specific gift requests

IF REQUESTING CLOTHING, list detailed sizes – include waist & length measurements if needed.

We are not responsible for any defects in merchandise you receive.

NOTE: We do *not* purchase gift cards, gift certificates, gasoline cards, cell phones, prepaid phone cards, toy weapons or age inappropriate video games or DVDs. Please do not request them!

BUDGET: 0 – 4 yrs $90 5 – 7 yrs $100 8 – 12 yrs $120 13 – 18 yrs $150

PLEASE PRINT CLEARLY!!! Fill in ALL columns. Give helpful details for gift requests. Use a separate sheet of paper if needed.

Child's 1st & Last Name	AGE & SEX	Shoe Size	List of Requested Toys & Gifts (check $ amt for age)
1st Child's Name:			
2nd Child's Name:			
3rd Child's Name:			
4th Child's Name:			
5th Child's Name:			
6th Child's Name:			
7th Child's Name:			
8th Child's Name:			