



FRIENDS OF OURS | Terrance Moses | 7735 N Brandon ave Portland or 97217 | 503.490.2598

Holiday Project 2024 Family Request Form

The Deadline for Holiday Project applications is Dec 12th, 2024

Head of household's name(s): _____

Address: _____

Daytime Phone: _____

Evening Phone (if different): _____

E-mail Address (optional): _____

When is the best time and way to contact you? _____

While we focus our gift giving efforts on the children,
please let us know what you, as the head(s) of your household, could use either for yourself,
or for your home. Please be as specific as possible. If the needed item is a personal one for you, please
include sizes and colors, etc. Santa would like to be able to remember all members of your household!

We will also put together a food basket with the fixings for Christmas Dinner.
Please let us know if you have any specific dietary restrictions or needs. Unless you tell us otherwise,
we will include a turkey or other poultry in your basket.

Please fill out this form as completely as possible, and return in the included envelope to
Friends Of Ours PDX

Once we receive your completed form, we will contact you if we have any questions.
We will email or call to arrange the time and date for the delivery and/or pickup of the gifts.

Deliveries will be made on December 21 or 23.

Friends of Ours PDX
7735 N Brandon Ave.
Portland, Oregon 97217

Contact Terrance with questions: TEXT or phone 503.490.2598, terrance@freindsofours.org



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Name of First Child: _____

Male/Female: _____ Age: _____ Grade in School: _____

Clothing Sizes: _____ Shoe Size: _____

Favorite Colors: _____

What do they enjoy doing in their spare time? _____

Articles of clothing needed: _____

What would they like? (special toy or gift, please list a few options): _____

Name of Second Child _____

Male/Female: _____ Age: _____ Grade in School: _____

Clothing Sizes: _____ Shoe Size: _____

Favorite Colors: _____

What do they enjoy doing in their spare time? _____

Articles of clothing needed: _____

What would they like? (special toy or gift, please list a few options): _____



Name of Additional Child: _____

Male/Female: _____ Age: _____ Grade in School: _____

Clothing Sizes: _____ Shoe Size: _____

Favorite Colors: _____

What do they enjoy doing in their spare time? _____

Articles of clothing needed: _____

What would they like? (special toy or gift, please list a few options): _____

Name of Additional Child: _____

Male/Female: _____ Age: _____ Grade in School: _____

Clothing Sizes: _____ Shoe Size: _____

Favorite Colors: _____

What do they enjoy doing in their spare time? _____

Articles of clothing needed: _____

What would they like? (special toy or gift, please list a few options): _____



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