



Christmas Store 2020
Dec. 7th, 2020—Dec. 12th, 2020

Dear Applicant,

Thank you so much for applying for the Metro Lutheran Ministry 2020 Christmas Store. Please read over this cover letter carefully, there are some changes to the Christmas Store this year due to the pandemic.

This year clients will not be shopping for their Christmas items. Instead, we have a household and family member survey that must be filled out so that we may shop for you. Clients will then come pick up their items during their appointment time. This ensures that clients, staff, and volunteers will be safe.

Secondly, there will be no application appointments this year. Applications will be dropped off and you will be contacted with your Christmas Store pick-up day and time. Please make sure that your contact information is correct. Also, be sure to attach a copy of the head of household's ID, a copy of your proof of income, and a copy of your proof of residency. Due to the pandemic we will not be able to make copies this year. Failure to attach items will mean that your application will not be approved. A check list has been provided for you.

Drop off will start Sept 1st and run through Oct. 31st. Drop off times are Monday—Friday, 8:30am-11am. The drop off location is 3031 Holmes, KCMO 64109.

The application will be available online starting August 17th, you can go to www.mlmkc.org to apply online. You will be able to upload your documents to the online application.

For questions please call 816-931-0027.

Sincerely,

Metro Lutheran Ministry



Christmas Store 2020 Application Check List

- _____ The top of the application has been signed.
- _____ Information for each household member has been filled out (name, date of birth, social security number—when applicable, etc.)
- _____ A copy of the head of household's ID is attached
- _____ A copy of the proof of income is attached
- _____ A copy of the proof of residency is attached
- _____ The wish list for the household has been filled out
- _____ The wish list for each family member of the household has been filled out

DROP OFF INFORMATION

Drop Off Dates: Sept 1st, 2020 through October 31st, 2020

Drop Off Times: Monday—Friday, 8:30am-11am

Drop Off Location:

3031 Holmes

Kansas City, MO 64109

Christmas Store 2020 Application



Dear Applicants—

MLM has income guidelines for those wishing to participate in the 2020 Christmas Store. **Please make sure that you submit proof of income, proof of residency, and the head of household's ID to ensure your application is processed, failure to do so could result in not being able to participate.** Additionally, due to the pandemic clients will not be shopping for their items. There is a survey for reach family member to fill out which will help us pick items for you and your family to be picked up by you. Please make sure that your phone number, email (if applicable) and address are current as you will be notified through one of these three ways of your acceptance into the program, along with your pick up day and time. The notification will include detailed instructions on how to pick up your items.

I certify that the information I have provided is true and correct. I consent to the release of pertinent information contained in the spaces above to concerned social service agencies, the Mid America Assistance Coalition (MAAC), Case Worthy, Service Point, and vendors as necessary to complete services to my household, or to provide statics on emergency assistance, or as a guard against duplication of assistance

Please sign here to indicate you have read and understand this statement:

_____ Date: _____

Application Instructions: Please answer each question on the application. Please make sure that you write your answers clearly and legibly.

Head of Household First and Last Name: _____

COPY of the Head of Household's ID MUST BE ATTACHED TO THIS APPLICATION

Email: _____

How Many Family Members Are In Your Household: _____

Phone Number: _____

Address:

Total Household Monthly Income:

Add the total monthly income (social security, employment, etc.) for each family member earning wages. Then write the monthly total on the line below:

ATTACH PROOF OF RESIDENCY (UTILITY BILL, PIECE OF MAIL, ID)

Preferred Method of Contact:

Phone Email Standard Mail

PROOF OF INCOME MUST BE ATTACHED TO THIS APPLICATION

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Members of the Household (please fill out for each member of your household):

	First and Last Name	Male or Female	Date of Birth	Age	Ethnicity (Hispanic or Non-Hispanic)	Race (Asian, African American, White, Multi-Racial, Etc.).	Social Security Number OR Alien Registration Number OR EIN Number
Head of Household							
2nd Family Member							
3rd Family Member							
4th Family Member							
5th Family Member							
6th Family Member							
7th Family Member							
8th Family Member							
9th Family Member							
10th Family Member							

What is your 1st and 2nd PREFERRED day and time for pick up? **(DOES NOT GUARANTEE DAY AND TIME)**

Pick Up Will Be Monday December 7th—Saturday December 12th

This year you will have a 2 hour window for pick up, there will not be an appointment time.

Morning window 9am-11am Afternoon window 1pm-3pm Evening Window: 6pm-8pm

1st Preferred Day and Time (Example: Monday Morning): _____

2nd Preferred Day (Example Thursday Evening): _____

First and Last name of person picking up items from the Christmas Store? (Person picking up will have to show ID)

How Many Children Under The Age
of 2 are in the Household?

How Many Children Between The
Ages of 2-12 are in the Household?

How Many Children Between the Ages of
13-17 are in the Household?

How Many Adults Over The Age of
65 are in the Household?

Do you prefer a gift or a gift card for your
teen(s) 13-17? (If not selection is provided
then one will be made for you. Also, we
cannot guarantee that we will have enough
gifts cards for everyone and a gift might be
substituted)

Gift Gift Card

**The family wish lists are on the
following pages. Please fill out each
question. Failure to do so will result
in your application being denied.**



Below are questions that pertain to items that the household receives, the wish list for each family member are on the following pages:

House Hold Wish List: Please Mark Your Top 3 Choices

Dishes Pots and Pans Silverware Mixing Bowls Towel Set Sheets
 Other _____

If you picked sheets, please write sheet size and preferred color below:

Small kitchen appliance wish list: Please Pick 3

Rice Cooker
 Crock Pot
 George Forman Grill
 Electric Skillet
 Griddle
 Blender
 Coffee Pot
 Popcorn Maker
 Electric Hand Mixer
 Electric Carving Knife
 Other _____

Would the family like a blanket or a quilt (pick 1)?

Blanket

Quilt

Size: _____

Color: _____

The wish list for each individual family member are on the following pages. Please answer each question for each family member in the household.



Individual Family Member Wish List

Head of Household:

Name: _____ Age: _____ Gender: _____

Would this person like clothing items (top and pants) or a robe, pj's, socks, underwear or undershirt instead? If yes, please specify which 2 items they would like please include size.

If a top and pants were chosen please answer the following questions:

Would this person like a sweatshirt or a top? _____ What Size? _____ Preferred Color? _____

Would this person like sweatpants or pants? _____ What Size? _____ Preferred Color? _____

Coat Size? _____ Youth or Adult? _____ Preferred Color? _____

List top 3 wants (example: purse, cologne, watch, etc.)

List top 3 need (examples: sheets, slippers, tools, etc.)

1.

1.

2.

2.

3.

3.

2nd Family Member:

Name: _____ Age: _____ Gender: _____

Would this person like clothing items (top and pants) or a robe, pj's, socks, underwear or undershirt instead? If yes, please specify which 2 items they would like please include size.

If a top and pants were chosen please answer the following questions:

Would this person like a sweatshirt or a top? _____ What Size? _____ Preferred Color? _____

Would this person like sweatpants or pants? _____ What Size? _____ Preferred Color? _____

Coat Size? _____ Youth or Adult? _____ Preferred Color? _____

List top 3 wants (example: purse, cologne, watch, etc.)

List top 3 need (examples: sheets, slippers, tools, etc.)

1.

1.

2.

2.

3.

3.

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3rd Family Member:

Name: _____ Age: _____ Gender: _____

Would this person like clothing items (top and pants) or a robe, pj's, socks, underwear or undershirt instead? If yes, please specify which 2 items they would like please include size.

If a top and pants were chosen please answer the following questions:

Would this person like a sweatshirt or a top? _____ What Size? _____ Preferred Color? _____

Would this person like sweatpants or pants? _____ What Size? _____ Preferred Color? _____

Coat Size? _____ Youth or Adult? _____ Preferred Color? _____

List top 3 wants (example: purse, cologne, watch, etc.)

List top 3 need (examples: sheets, slippers, tools, etc.)

- 1.
- 2.
- 3.

- 1.
- 2.
- 3.

4th Family Member:

Name: _____ Age: _____ Gender: _____

Would this person like clothing items (top and pants) or a robe, pj's, socks, underwear or undershirt instead? If yes, please specify which 2 items they would like please include size.

If a top and pants were chosen please answer the following questions:

Would this person like a sweatshirt or a top? _____ What Size? _____ Preferred Color? _____

Would this person like sweatpants or pants? _____ What Size? _____ Preferred Color? _____

Coat Size? _____ Youth or Adult? _____ Preferred Color? _____

List top 3 wants (example: purse, cologne, watch, etc.)

List top 3 need (examples: sheets, slippers, tools, etc.)

- 1.
- 2.
- 3.

- 1.
- 2.
- 3.

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5th Family Member:

Name: _____ Age: _____ Gender: _____

Would this person like clothing items (top and pants) or a robe, pj's, socks, underwear or undershirt instead? If yes, please specify which 2 items they would like please include size.

If a top and pants were chosen please answer the following questions:

Would this person like a sweatshirt or a top? _____ What Size? _____ Preferred Color? _____

Would this person like sweatpants or pants? _____ What Size? _____ Preferred Color? _____

Coat Size? _____ Youth or Adult? _____ Preferred Color? _____

List top 3 wants (example: purse, cologne, watch, etc.)

List top 3 need (examples: sheets, slippers, tools, etc.)

- 1.
- 2.
- 3.

- 1.
- 2.
- 3.

6th Family Member:

Name: _____ Age: _____ Gender: _____

Would this person like clothing items (top and pants) or a robe, pj's, socks, underwear or undershirt instead? If yes, please specify which 2 items they would like please include size.

If a top and pants were chosen please answer the following questions:

Would this person like a sweatshirt or a top? _____ What Size? _____ Preferred Color? _____

Would this person like sweatpants or pants? _____ What Size? _____ Preferred Color? _____

Coat Size? _____ Youth or Adult? _____ Preferred Color? _____

List top 3 wants (example: purse, cologne, watch, etc.)

List top 3 need (examples: sheets, slippers, tools, etc.)

- 1.
- 2.
- 3.

- 1.
- 2.
- 3.

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7th Family Member:

Name: _____ Age: _____ Gender: _____

Would this person like clothing items (top and pants) or a robe, pj's, socks, underwear or undershirt instead? If yes, please specify which 2 items they would like please include size.

If a top and pants were chosen please answer the following questions:

Would this person like a sweatshirt or a top? _____ What Size? _____ Preferred Color? _____

Would this person like sweatpants or pants? _____ What Size? _____ Preferred Color? _____

Coat Size? _____ Youth or Adult? _____ Preferred Color? _____

List top 3 wants (example: purse, cologne, watch, etc.)

List top 3 need (examples: sheets, slippers, tools, etc.)

- 1.
2.
3.

- 1.
2.
3.

8th Family Member:

Name: _____ Age: _____ Gender: _____

Would this person like clothing items (top and pants) or a robe, pj's, socks, underwear or undershirt instead? If yes, please specify which 2 items they would like please include size.

If a top and pants were chosen please answer the following questions:

Would this person like a sweatshirt or a top? _____ What Size? _____ Preferred Color? _____

Would this person like sweatpants or pants? _____ What Size? _____ Preferred Color? _____

Coat Size? _____ Youth or Adult? _____ Preferred Color? _____

List top 3 wants (example: purse, cologne, watch, etc.)

List top 3 need (examples: sheets, slippers, tools, etc.)

- 1.
2.
3.

- 1.
2.
3.

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9th Family Member:

Name: _____ Age: _____ Gender: _____

Would this person like clothing items (top and pants) or a robe, pj's, socks, underwear or undershirt instead? If yes, please specify which 2 items they would like please include size.

If a top and pants were chosen please answer the following questions:

Would this person like a sweatshirt or a top? _____ What Size? _____ Preferred Color? _____

Would this person like sweatpants or pants? _____ What Size? _____ Preferred Color? _____

Coat Size? _____ Youth or Adult? _____ Preferred Color? _____

List top 3 wants (example: purse, cologne, watch, etc.)

List top 3 need (examples: sheets, slippers, tools, etc.)

1.

2.

3.

1.

2.

3.

10th Family Member:

Name: _____ Age: _____ Gender: _____

Would this person like clothing items (top and pants) or a robe, pj's, socks, underwear or undershirt instead? If yes, please specify which 2 items they would like please include size.

If a top and pants were chosen please answer the following questions:

Would this person like a sweatshirt or a top? _____ What Size? _____ Preferred Color? _____

Would this person like sweatpants or pants? _____ What Size? _____ Preferred Color? _____

Coat Size? _____ Youth or Adult? _____ Preferred Color? _____

List top 3 wants (example: purse, cologne, watch, etc.)

List top 3 need (examples: sheets, slippers, tools, etc.)

1.

2.

3.

1.

2.

3.

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