

**ANNUAL RIBBON TREE
APPLICATION FORM**

**SPONSORED BY NELIGH-OAKDALE FCCLA
In Conjunction with Nebraska Health and Human Services**

These applications must be returned to the Health and Human Services office at the Antelope County Courthouse. The address is on the bottom of this form. All information will be kept confidential.

I am interested in receiving Christmas gifts for adults. (please print)

_____ OR _____
Willows--Name Golden Age Living Center--Name

_____ Address
Your name

_____ Phone Number
City

<u>Name of Adult</u>	<u>Sex</u>	<u>Age?</u>	<u>Gift Suggestion</u>	<u>Clothing Size</u>
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____
5. _____	_____	_____	_____	_____

(List additional adults on the back of this form)

**APPLICATIONS MUST BE MAILED TO OR DELIVERED TO THE
FOLLOWING ADDRESS BY MONDAY, NOVEMBER 16TH, 2015.**

**HEALTH AND HUMAN SERVICES ATTN: PATTI
501 M Street
NELIGH, NE 68756
Or email to: Patti.Brady@nebraska.gov**

Notices will be sent out to each qualifying applicant as to the date, time, and place to pick up your gifts.