Integrated community solutions

Ladder of Hope

THANKSGIVING DINNER INTEREST FORM

Please Print:

Name: _____

Address: _____ Email: _____

Household/Family Size: _____ Phone No.: _____

HCV Client: ⬭ Yes ⬭ No If Yes, Tenant ID: _____

Note: Limited quantities are available.

⬭ **Thanksgiving Dinner** – Includes ready to bake turkey, potatoes, and other holiday meal fixings.

Have you or your household member(s) received a Thanksgiving Dinner from ICS in a prior year?

Yes ⬭ No ⬭

Please share with us how this assistance would impact you and your household this Holiday Season:

If additional space is needed please use the back of this form or attach an additional page.

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By my signature below I acknowledge that I am over the age of 18 and also that I grant permission to ICS Ladder of Hope to use my story above, in whole or in part, and also to reproduce photos should any be taken of me and/or my family members for ICS promotional use.

Signature: _____ **Date:** _____

This completed form may be: Emailed to loride@ics-gb.org or Dropped off/Mailed to: Integrated Community Solutions, Inc., Attn: Ladder of Hope, 2605 S. Oneida St., Suite 106, Green Bay, WI 54304

Completed Interest Forms accepted through October 19, 2018.