



WORTH TOWNSHIP
CHRISTMAS CARE PROGRAM
APPLICANT INFORMATION

2024 Christmas Care Information

Families who live in Worth Township and are experiencing financial difficulty at Christmas time can come to Worth Township and fill out an application form for items for their children (newborn to 14 years old) to help with Christmas presents beginning November 18th thru December 5th, Monday through Thursday from 8am – 4pm.

Applications will not be accepted after the closing date.

We will also have applications on our website www.worhtownship.com for your convenience.

Families must complete the application and bring in a valid current driver's license/state ID with your current address, a birth certificate for each child receiving toys, and a copy of your current utility bill with the same address as your ID. All documents will be verified and returned. Applicants must be available to pick up items on December 16th - 18th.

If you have any questions, please call 708-972-7837 or email youthcommission@worhtownship.com.

Worth Township



Patricia Joan Murphy
Supervisor
Eamon J. McMahon
Clerk
Shuan C. Murphy
Assessor

Trustees

Richard J. Lewandowski
Kelly Sexton-Kelly
Jerry Hurckes
Mychal J. Toscas

WORTH TOWNSHIP
11601 South Pulaski
Alsip, IL 60803

Direct Line:
708-972-7837

www.worhtownship.com
youthcommission@worhtownship.com

2024 CHRISTMAS CARE APPLICATION FORM



PLEASE PRINT

Parent/Guardian's Name: _____

Address: _____

Town/City: _____ Zip Code: _____

Home #: _____ Cell #: _____

Email Address: _____

This program is limited to children ages 14 and under

Child\Childrens' Names:

Name: _____ Birthdate: _____ Age: _____ Male \ Female

Sizes: _____ ** Any special interests (see below): _____

Name: _____ Birthdate: _____ Age: _____ Male \ Female

Sizes: _____ ** Any special interests (see below): _____

Name: _____ Birthdate: _____ Age: _____ Male \ Female

Sizes: _____ ** Any special interests (see below): _____

Name: _____ Birthdate: _____ Age: _____ Male \ Female

Sizes: _____ ** Any special interests (see below): _____

Name: _____ Birthdate: _____ Age: _____ Male \ Female

Sizes: _____ ** Any special interests (see below): _____

****Special interests include dolls (*preferred skin tone*), sports, puzzles, cars/trucks, board games, books, stuffed animals, arts & crafts, etc. (There are no guarantees we will have what you request).**

Please Sign: _____

Name

Date

For Office Use Only: ID ___ Utility Bill ___ Birth Certificate ___ Verified by ___