

(TRANSMIT COMPLETED FORM BY FAX (619) 447-1029 OR E-MAIL:
sdhomeless@gmail.com)

SAN DIEGO COALITION FOR THE HOMELESS
ANNUAL CHRISTMAS PARTY FOR CHILDREN

HOLIDAY MAGIC FOR KIDS

First/Last Name _____

E-Mail _____ Ph # _____

Address _____

City _____ State _____ Zip _____

No. of years Volunteering _____ Occupation _____

Work Areas

(Circle Choices)

- | | |
|---------------------------------|------------------------------------|
| 1. Entrance - Children Check in | 8. Stocking Stuffer |
| 2. Volunteer Desk | 9. Face Painting |
| 3. Entertainment | 10. Volunteer Food |
| 4. Food Distribution | 11. Security |
| 5. Wrapping Gifts | 12. Fund Raising |
| 6. Set-up/Clean-up | 13. Other |
| 7. Toy Hand-out | 14. Captain (of one of the above). |

Suggestions/Comments/Skills _____
