



WILLIAM HALL RODGERS

UNITED WAY CHRISTMAS FOOD BASKETS

TICKET # _____ (to be completed by staff only)

APPLICATION

Name (Head of Household): _____ Last 5 digits of Social Security #: _____ Birthdate: _____

☐ Employed ☐ Self-Employed ☐ Retired ☐ Disability Income: \$ _____ (monthly)

Name (Spouse): _____ Last 5 digits of Social Security #: _____ Birthdate: _____

☐ Employed ☐ Self-Employed ☐ Retired ☐ Disability Income: \$ _____ (monthly)

Address: _____ City: _____ State: _____ Zip: _____ County: _____

Phone Number: _____ ☐ Cell ☐ Home ☐ Work Total Number in Household: _____

LIST ALL OTHER MEMBERS OF HOUSEHOLD NOT LISTED ABOVE

NAME	DATE OF BIRTH	RELATIONSHIP

SIGNATURE: _____ DATE: _____

HOW IT WORKS

- 1** Fill out the application or pass it along to someone who could benefit.
(One application per household, please. All information provided will remain confidential.)
- 2** Bring **completed application** and **proof of identification (ID)** to **The Denning Center** (350 Central Ave NW; Cleveland, TN 37311) on **Tuesday, November 4, 2025** between 8:30 a.m. and 4:00 p.m.
- 3** Receive ticket with location, directions, date, and time of basket pickup.
DO NOT LOSE TICKET. NO TICKET = NO BOX
- 4** Pick up basket at specified location, date, and time. Enjoy and have a safe and happy holiday season!