



Give A Kid A Chance

Back-to-School Program

Saturday, July 13, 2019

This program helps Cherokee County Kids prepare for the 2019-2020 School Year!

Give A Kid A Chance is a back-to-school outreach that provides the following **FREE** goods and services:

- ✓ Backpack Filled with School Supplies
- ✓ Dental, Hearing and Vision Screening
- ✓ New Socks, Underwear and Clothing
- ✓ Haircut

Lunch will be provided to the Family

CHOOSE ONE OPTION BELOW: Only 1 application will be accepted per family. Please Do Not Send or Enter Duplicates.

- 1) Return completed form to School Counselor before last day of school or Summer Lunch Driver (by June 14th) **OR**
- 2) Mail form to: GAKAC PO. Box 471 Holly Springs, GA 30142 (By June 8th) **OR**
- 3) Skip this form and Register online at www.giveakidachance.org (by June 14th)

Please indicate pick up location preference: (Please check location)

Hillside United Methodist Church – 4474 Towne Lake Parkway, Woodstock, GA 30189

Canton First Baptist Church – 1 Mission Point, Canton GA 30114

Pick up Date is July 13th. Your actual Appointment time will be emailed 2-3 weeks before this date.

To ensure your information is received please fill out form legibly using Black or Blue pen only.

Parent/Guardian First Name: _____ Last Name: _____

Street Address: _____

City: _____ Zip Code: _____

Phone Number: _____ Email: _____

Emails are used to notify you of the Date, Appointment Time and Location of the GAKAC Event

Children must be age 5 before Sept 1, 2019 and enrolled in Kindergarten to be eligible for this Event.

(Pre-K Children and Children entering College are not eligible for this Event.)

| Child First Name | Child Last Name | Birthdate MM/DD/YY | Gender (circle) | School Attending August 2019 | Grade (K - 12) | Ethnicity Code # | Ethnicity Code #'s |
|------------------|-----------------|-----------------------|--------------------|---------------------------------|-------------------|---------------------|-----------------------|
| | | / / | F / M | | | | 1 -White |
| | | / / | F / M | | | | 2-African American |
| | | / / | F / M | | | | 3-Hispanic |
| | | / / | F / M | | | | 4-Native American |
| | | / / | F / M | | | | 5-Asian |
| | | / / | F / M | | | | 6-Other |

By completing this form, I hereby agree that I am the Parent or Lawful Guardian of the child whose names are listed above. I hereby agree that Give A Kid A Chance Cherokee, Inc. is entitled to provide and share information with agencies in Cherokee County to ensure the same goods are not provided by other agencies..

Any questions please call Kathy Bertaccini 404-480-2334.

Required Signature of Parent or Lawful Guardian: _____