

KAC SERVES BABY/TODDLER ESSENTIALS EMERGENCY NEED REQUEST

Name: _____ Date: _____

Address: _____ City _____ Zip _____

Person picking up, if other than above: _____

CHILD INFO (Receiving essentials today)

(emergency only-1x/month)

Gender	Age
Male / Female	
Male / Female	
Male / Female	
Male / Female	

Diapers	Pull-Ups
Sz _____	Sz _____
Sz _____	Sz _____
Sz _____	Sz _____
Sz _____	Sz _____

Underwear	Socks

BABY/TODDLER CARE: Please check/circle needed items

<input type="checkbox"/>	Baby wipes
<input type="checkbox"/>	Infant formula _____
<input type="checkbox"/>	Baby cereal: rice / oatmeal / grain
<input type="checkbox"/>	Baby food - Stage 1, 2, or 3

<input type="checkbox"/>	Baby/child shampoo
<input type="checkbox"/>	Baby body wash
<input type="checkbox"/>	Baby lotion
<input type="checkbox"/>	Other: _____

<input type="checkbox"/>	Toddler/child toothpaste
<input type="checkbox"/>	Toddler/child toothbrush
<input type="checkbox"/>	Baby bottle
<input type="checkbox"/>	Toddler sippy cup

- This is an emergency only service. Items may be requested every 2 weeks as needed. Socks/underwear available once a month only.
- Requests are filled on a first come, first serve basis; and according to availability of items. We reserve the right to refuse service and/or items to anyone for any reason.
- If you need clothing, shoes, or other baby/children's items, please sign up and attend a Clothe Me Co-Op distribution (see KAC Serves flyer for details).