



BENTON CITY

# Holiday Blessing Boxes

Sign up to be considered for a Holiday Blessing Box, provided by the Benton City Chamber of Commerce. Please provide as much information as possible, to help us provide items that your family may need and gifts that your child would enjoy.

\_\_\_\_\_  
Your Name

\_\_\_\_\_  
Contact Phone Number

\_\_\_\_\_  
Name of Family (if not your own)

\_\_\_\_\_  
Their Contact Phone Number

\_\_\_\_\_  
Address Where Box is going (Benton City Residents ONLY, please)

\_\_\_\_\_  
How many Adults | How many Children in household

\_\_\_\_\_  
Child's Name      Gender      Age      Tell us about this child: Favorite Color, size, toys, games, needs, etc.....

\_\_\_\_\_  
Child's Name      Gender      Age      Tell us about this child: Favorite Color, size, toys, games, needs, etc.....

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Please return this form to the Benton City Chamber of Commerce NO LATER THAN December 6<sup>th</sup> to be considered. Mail to: PO Box 401, Benton City, WA 99320 or during office hours at 513 9<sup>th</sup> Street, Benton City or by email at: info@bentoncitychamber.org.