



Warm the Children Application

Deadline for Submitting Application is November 16, 2023

Parent's Name: _____ Phone (Required) _____

Second Contact: _____ Phone (Required) _____

Address: _____ SS#: _____

City _____ State: _____ Zip: _____

Children from newborn through age 18 as of Dec. 31, 2023, are eligible. Please enter child's sizes as if you were shopping for new winter clothing for them. A family household of 4 can make up to \$5,000 per month and still be eligible. Also, all families receiving TANF/SNAP, SSI/SSDI, or DHHR public assistance payments are eligible. If you need help filling out forms call Eastern Action at 304-822-5584.

Child 1	Child 2	Child 3	Child 4	Child 5
M _____ F _____	M _____ F _____	M _____ F _____	M _____ F _____	M _____ F _____
Age _____	Age _____	Age _____	Age _____	Age _____
Height _____	Height _____	Height _____	Height _____	Height _____
Weight _____	Weight _____	Weight _____	Weight _____	Weight _____
Shoe Size _____	Shoe Size _____	Shoe Size _____	Shoe Size _____	Shoe Size _____
Coat Size _____	Coat Size _____	Coat Size _____	Coat Size _____	Coat Size _____

Please circle only 1 size per child

Size (Circle One)	Size (Circle One)	Size (Circle One)	Size (Circle One)	Size (Circle One)
Infant Sizes 3 mo. 18 mo. 4T 6 mo. 2T 5T 12 mo. 3T	Infant Sizes 3 mo. 18 mo. 4T 6 mo. 2T 5T 12 mo. 3T	Infant Sizes 3 mo. 18 mo. 4T 6 mo. 2T 5T 12 mo. 3T	Infant Sizes 3 mo. 18 mo. 4T 6 mo. 2T 5T 12 mo. 3T	Infant Sizes 3 mo. 18 mo. 4T 6 mo. 2T 5T 12 mo. 3T
Youth Sizes 6 8 10 12	Youth Sizes 6 8 10 12	Youth Sizes 6 8 10 12	Youth Sizes 6 8 10 12	Youth Sizes 6 8 10 12
Teen Sizes 14 16 18	Teen Sizes 14 16 18	Teen Sizes 14 16 18	Teen Sizes 14 16 18	Teen Sizes 14 16 18
Adult Sizes For Teens S M L XL	Adult Sizes For Teens S M L XL	Adult Sizes For Teens S M L XL	Adult Sizes For Teens S M L XL	Adult Sizes For Teens S M L XL
Larger Size (Please specify) _____	Larger Size (Please specify) _____	Larger Size (Please specify) _____	Larger Size (Please specify) _____	Larger Size (Please specify) _____

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Parent or Guardian's Signature _____ Date _____

Items Picked Up By
Initials _____
Date _____

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Please mail to Eastern Action, P.O. Box 496, Romney, WV 26757 or return this application to Eastern Action, 24986 Northwestern Pike, Suite D, Romney, WV 26757 • 304-822-5584