

Holiday Adopt A Family

Thank you for your willingness to support Desert Mission by adopting a family this holiday season. Return your completed form or contact us with questions:

Email: desertmission@honorhealth.com Phone: **602-786-1150** Fax: **602-331-5744**

ADOPTING GROUP INFORMATION:

*** Required fields**

Group Name (if applicable): _____

*Contact Person: _____

*Address: _____ Apt/Ste: _____

City: _____ State: _____ Zip: _____

*Phone: _____

Fax: _____ *Email: _____

FAMILY MATCH INFORMATION:

*Total in Household: ___ 1-3 ___ 4-6 ___ 7+ Number of families I'd like to adopt: _____
(Please indicate 1st, 2nd, and 3rd choice.)

(Number of families assigned will be based on availability.)

***Please note: All gifts must be delivered to Desert Mission Food Bank.**

For Desert Mission Staff Use Only:

Matched _____ Sent to Donor _____ Gifts Delivered _____

Matched Family ID _____

