

Family Name: \_\_\_\_\_ Date: \_\_\_\_\_

Family Mentor Name: \_\_\_\_\_

	FAMILY MEMBER NAME	AGE	GENDER (M/F)
1			
2			
3			
4			
5			
6			
7			

**Outerwear List** (Make a checkmark for items that each family member already has)

**Name:** \_\_\_\_\_

- Winter Coat
- Snow pants
- Boots
- Gloves/mittens
- Hat
- Scarf
- Socks
- Sweaters
- Other clothes collected: \_\_\_\_\_

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