



SHOE/SWEATSHIRT REQUEST FORM

School Name: _____

Principal: _____

Phone Number: _____

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Number of Shoes requested: _____

Number of Sweatshirts requested: _____

Of the above number how many are in immediate need?

Shoes: _____ **Sweatshirts:** _____

Comments: _____

Please indicate the number of students in immediate need as they will be our priority. We will do our best to meet the need of all students, however, we are limited by our budget.

Fax this form to: (805) 349-2853 or call Delight at 922-788