



Inkster Goodfellows

**P.O. Box 266
Inkster MI 48141**



**Application for the Inkster Goodfellows Donation
(Inkster Residents Only)**

PLEASE PRINT

For Office Use Only

HEAD OF HOUSEHOLD: _____
LAST NAME FIRST NAME

ADDRESS: _____
NUMBER AND STREET NAME INKSTER MI

PHONE () _____

**YOU MUST SHOW PROOF OF INKSTER RESIDENCY.
THE INKSTER GOODFELLOWS WILL ONLY PROVIDE CHRISTMAS
GIFTS FOR CHILDREN AGES 2 THROUGH 14 YEARS OLD.
YOU MUST HAVE BIRTH CERTIFICATE OR PROOF OF AGE FOR
EACH CHILD AT TIME OF PICK UP.**

NAME	AGE	SEX

**DEADLINE FOR APPLICATION: WEDNESDAY, NOVEMBER 23RD, 2022
PLEASE DROP OFF APPLICATIONS AT CITY HALL - 26215 TROWBRIDGE,
DOZIER RECREATION COMPLEX - 2025 MIDDLEBELT OR
INKSTER HOUSING LEHIGH CENTER - 27441 LEHIGH.**

CONTACT BARBARA COOPER (313) 505-1140 WITH ANY QUESTIONS.