Highland Baptist Church Christmas Basket Application 2026

Zip Codes Eligible for ALL BASKETS are 73160, 73165, 73170

APPLICATION MUST BE RECEIVED BY 4PM ON WEDNESDAY, NOVEMBER 18TH TO BE INCLUDED.

Phone: 405 794-5432 Email: Loni@hbcmoore.org Mailing Address: 2425 SE 4th St // Moore, OK 73160

Children in the home, ages 18 and under, will be eligible for gifts. Ages 19 and over are food baskets only.

The Christmas baskets include a turkey or ham, perishable and non perishable food items as well as other goodies as available.

Instructions (READ CAREFULLY)

One basket will be issued per household address.

- ***Place completed applications*** *in a drop box and they will make it to the church office.*
- ***If visiting food pantry,*** *complete application then and turn in to a pantry volunteer.*
- ***Another return option*** *is to screen shot or scan and email us your completed application to loni@hbcmoore.org* ***if you need to take it home to complete.***
- ***We will call the numbers*** *you provide on this application for any questions and to set up a time for you to personally come in to submit proof of residency for everyone living in the home* ***or*** *you may submit the proof with screen shots and email to the address above. Be sure your voicemail isn't full for us to leave a message. If we can't reach you, you will not be considered.*
- ***It's*** *your responsibility to reach us if you have updated contact information to submit.*

Christmas Basket pick up day is Wednesday, December 16th. You will be contacted via phone and / or email to advise of pick up process instructions and your specific pick up time which will be at 6:30PM or after.

If you are a Highland member nominating a family, submit your info below…

First and Last Name of person nominating the family _____

Phone Number _____ Do you want to deliver the basket to the family? NO YES

Circle one. If you select NO, the family will be contacted to pick up their basket on distribution day, December 16th

Turn over to complete.

Applicant Info.

Office Use Only: Family #_____ PU Time_____Notes:_____

PLEASE PRINT LEGIBLY:

Today's Date_____ First Name _____ Last Name _____

Primary Phone # _____ Alternate Phone # _____

Email Address _____ Physical Address _____ City _____

Mailing Address if different than physical address above: _____

City _____ Zip _____

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED. ***Everyone in the home must be listed below.***

- Proof of residency is required for ***ALL INDIVIDUALS LIVING IN THE HOME***, including children and senior citizens.
- Forms accepted for proof of residency include:**(dated within the last 60 days)**- DHS statements; letters from schools, doctors, or daycares; utility bill; medical bill; and/or mortgage/lease agreement
- Each child in the home age 18 and under will receive 1 gift. $50 cap on needs and wish lists written below.

Household Position = H – Head of household, A – Adult living in household, C – Child living in household (18-under)

House hold Position	Last Name	First Name	Birth Date	Age	Gender	If in school, where and what grade?	Shirt Size *(for ages 18 and under)*	Pant Size *(for ages 18 and under)*	Please list clothing needs. *(for ages 18 and under)*	Toys or Special Interests or Hobbies *(for ages 18 and under)*