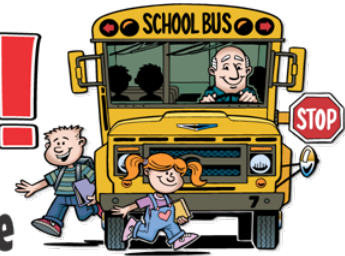


STUFF THE BUS!

A Coordinated Community School Supplies Drive



Christian Clearing House
Christians Helping in Crisis™



School Supply/Project Happy Feet Registration Form

Guardian's Name _____

Address _____

City/State/Zip Code _____

Phone Number _____

Complete for each child:

Child's Name	SS # (required)	Birthday	Grade	School

Boy/Girl **Supplies** Yes/ No **Backpack** Yes/No **Shoe Voucher** Yes/No

Child's Name	SS # (required)	Birthday	Grade	School

Boy/Girl **Supplies** Yes/ No **Backpack** Yes/No **Shoe Voucher** Yes/No

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