



LSS # _____

Ledyard Social Services 2025 Adopt-A-Family Registration Form

Please Return your Adopt-A-Family form by: Thursday, November 13, 2025

*Forms must be returned by the deadline to qualify and be matched with a Donor. Thank You!

Adopt-A-Family - Gift Pick Up

Tuesday, December 16, 2025

1:00 p.m. – 4:00 p.m.

Gales Ferry Fire Company

1772 Route 12, Gales Ferry, CT 06335

***Please mark this date on your calendars!**

Contact Information:

Name:

Head of Household

Phone:

Home

Cell

Work

Email:

If you cannot pick-up your Adopt-a-Family gifts, please plan to have someone pick them up for you. Please let Social Services know the name of the person that will be picking them up. We do not have the capacity to store gifts, and **gifts will not be held after 4:00pm**. Thank you for understanding! **Please return your form by Thursday, November 13, 2025.**

Questions? Contact Kristen Chapman at 860-464-3222 or mayoral.asst@ledyardct.org

RELEASE OF CONFIDENTIALITY:

I/We understand and agree that the Holiday Programs are possible through community member's time and donations. I / We hereby release the Town of Ledyard, its' agents and volunteers from all liability regarding my participation in the Holiday Programs, as members of the community will be assisting with the Adopt-a-Family Program.

Head of Household/Applicant's Signature

Date

Forms can be mailed Attn: Social Services, Town Hall, 741 Colonel Ledyard Hwy, Ledyard CT 06339; emailed to mayoral.asst@ledyardct.org ; or dropped off at Social Services located in the Mayor's Office.

Family # _____

Adopted by _____

Holiday Wish List

Child Information:

Please provide the following information for **EACH CHILD under the age of 18**. Please **DO NOT INCLUDE NAMES**. Each wish should have a value of no more than \$25.00. We cannot guarantee that a child will receive both wishes. You will also have an opportunity to shop for additional gifts for each child during pickup on Tuesday, December 16th from 1:00pm to 4:00 p.m.

Age: _____ M/F

Clothing Sizes:

Pant: _____ Shirt: _____

Favorite Color: _____

Interests: _____

Wish #1: _____

Wish #2: _____

Age: _____ M/F

Clothing Sizes:

Pant: _____ Shirt: _____

Favorite Color: _____

Interests: _____

Wish #1: _____

Wish #2: _____

Age: _____ M/F

Clothing Sizes:

Pant: _____ Shirt: _____

Favorite Color: _____

Interests: _____

Wish #1: _____

Wish #2: _____

Age: _____ M/F

Clothing Sizes:

Pant: _____ Shirt: _____

Favorite Color: _____

Interests: _____

Wish #1: _____

Wish #2: _____