



LSS # _____

Ledyard Social Services 2025 Thanksgiving Holiday Meal Registration Form

Please Return your Registration form by: Monday, November 10, 2025

Thanksgiving Holiday Meal Pick Up

Tuesday, November 25, 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! Holiday meals will not be held after 4:00 p.m.**

Contact Information:

Name: _____ **Household Size:** _____
Head of Household

Phone: _____
Home Cell Work

Email: _____

Guests will receive a Turkey or Turkey Breast based upon household size along with fixings for a Thanksgiving meal and a pie for dessert. **Please return your registration form by Monday, November 10, 2025.**

If you cannot pick-up your Thanksgiving meal, please plan to have someone pick up for you. Please let Social Services know the name of the person that will be picking up Thanksgiving meal. We do not have the capacity to store meals, and **Food Bags will not be held after 4:00 p.m.** Thank you for understanding!

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

RELEASE OF CONFIDENTIALITY:

I/We understand and agree that the Thanksgiving Program is possible through community members time and donations. I/We, hereby release the Town of Ledyard, its' agents, and volunteers from all liability regarding my participation in the Thanksgiving 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.