

Every year, our Holiday Basket Program delivers hundreds of baskets with gifts, clothing, food and other items to people living with HIV/AIDS and their families.

There are a variety of ways you can help, including:

Adopt a Basket:

Shop for gifts for an individual, couple or family basket. (The suggested budget is \$35 per person.) This is a wonderful project for your family, faith group or co-workers!

ADOPTION IS OUR GREATEST NEED!

Decorate Baskets (during September/October):

Your group can paint boxes with winter holiday themes. Return by November 1.

Sew Stockings:

Create lovely homemade holiday stockings. Sewing pattern is available on our website. Return by December 19.

Bake Cookies:

Bake your favorite holiday cookies at your home. Bag by the dozen and return cookies between December 17 and 19.

Host a Drive:

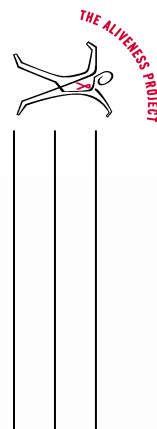
Your school, faith group or workplace can hold a drive for new clothing, gloves, small household items, nonperishable food, hygiene items, toys or gift cards.

Deliver Baskets:

Deliver 1-2 baskets to recipients' homes.

Leadership Roles:

Exciting, meaningful and dynamic opportunities! Volunteer as a "captain" by supervising other volunteers, soliciting donations, filling baskets or coordinating other activities (5 -15 hours per week).



Holiday Basket Program
The Aliveness Project
730 East 38th Street
Minneapolis, MN 55407

Please add
postage stamp.
Thank you!

Thanks to our Sponsor!

LAVENDER

THE ALIVENESS PROJECT

holiday basket program

You can
make this
holiday season
brighter for
individuals & families
affected by HIV/AIDS.

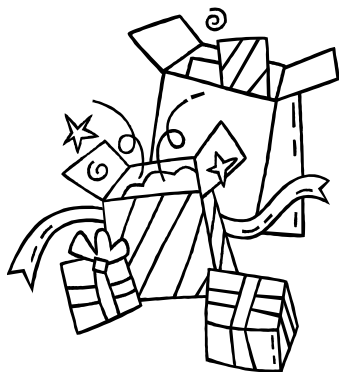
612-824-LIFE (5433)
aliveness.org



Share the Spirit of the Season!

Founded in 1985, The Aliveness Project is a local nonprofit organization that offers a variety of supportive services for individuals living with HIV/AIDS.

Since 1988, our Holiday Basket Program has provided thousands of gift baskets to men, women and children affected by HIV/AIDS throughout Minnesota.



Each holiday season, hundreds of volunteers help by adopting baskets, donating gifts, wrapping presents, baking cookies, sewing holiday stockings, and delivering baskets.

You can share the spirit of the season by adopting a basket, making a donation, or volunteering with our Holiday Basket Program.

Adoption is our greatest need!

IF YOU CAN HELP, PLEASE MAIL OR FAX THIS FORM TO:

THE ALIVENESS PROJECT



Holiday Basket Program
The Aliveness Project
730 East 38th Street
Minneapolis, MN 55407

TEL: 612-824-LIFE (5433)
FAX: 612-822-9668

E-mail: events@aliveness.org
Website: www.aliveness.org

25th Annual

Holiday Basket Program Donor & Volunteer Form

Online form at
aliveness.org

We need your help with our Holiday Basket Program for people living with HIV/AIDS!
Your care and commitment will help make a brighter holiday season for those in need.

Name(s): _____

Organization: _____ Employer: _____

Address: _____

City, State, Zip: _____

Phone: Preferred: ☐ Home ☐ Cell ☐ Work (_____) Secondary: ☐ H ☐ C ☐ W (_____) _____

E-mail: _____ Twitter: _____

ADOPT

☐ I want to adopt (& buy gifts for) a holiday basket for: ☐ No Preference ☐ Individual ☐ Couple ☐ Family

To determine **how many people you could adopt** (wrap and buy presents for each person), first choose the total amount you want to spend; then divide that total by \$35 (the amount we suggest spending on each individual). We will provide you with a wish list for each adopted basket.

My total budget is: \$ _____ **Total number of people to adopt:** _____

DONATE

☐ Please contact me/us about making an in-kind donation of _____

We need **in-kind donations** of new clothing, toys (for children & teenagers), gift cards, gloves, stocking caps, boots, games, kitchen supplies, quilts, CDs, DVDs, sporting equipment, etc.

☐ Enclosed is a donation for \$ _____. Please make your check payable to "The Aliveness Project."

☐ I want to make a credit card donation. Please charge \$ _____ to my ☐ Visa ☐ MasterCard.

Credit card number: _____ Expiration date: _____

Name on credit card: _____ Your signature: _____

Please use my gift for: ☐ Holiday Baskets ☐ Food Shelf ☐ Meals ☐ Therapies ☐ General Services

This donation is in ☐ Honor (or) ☐ Memory of: _____

VOLUNTEER

☐ Please contact me (or us) about volunteering to help with:

☐ Leadership role! * (5-15 hours/week) ☐ Sewing holiday stockings ☐ Decorating boxes (Sept.-Oct.)
☐ Special events! ** ☐ Sewing quilts/afghans/throws ☐ Baking cookies
☐ Driving errands ☐ Wrapping presents ☐ Soliciting in-kind donations

☐ Organizing a drive for new clothing, toys, gift cards, food or other gifts

☐ Delivering 1-2 Hanukkah Baskets on Friday, Dec. 7 (limited number — requires a vehicle)

☐ Delivering 1-2 Christmas Baskets (requires a vehicle) on:

☐ Friday, Dec. 14 between 1:00 pm - 4 pm, or

☐ Monday, Dec. 24, between 9:00 am - 2 pm

- Preferred Start Time: _____

- Preferred Zip Code or City for Deliveries: _____

- Type and Size of Vehicle: _____

*Leadership roles vary to suit interests & needs. **Special events assistance involves staffing booths at concerts, parties, etc.
Notes: _____