Rotary
Club of Monroe County

Caring Cases Application

Please send to RotaryCaringCases@gmail.com

Child's Name*: _____

Age: _____

Sex: M / F

Town of Residence: _____

Clothing Size: _____

Reason for Need: _____

_____

Referred by: _____
(if applicable)
    Occupation: _____

Contact Number: _____
(parent, guardian, or referral source)

*To protect a child's confidentiality, first and last initial may be used in place of name.

For use by Rotary Club of Monroe County only	
Received: _____	Reviewed: _____
Recorded: _____	Distributed: _____

20171001