



Operation Kid Comfort Quilt Request

Operation Kid Comfort Quilts are for children, ages six and under (pillows for the older kids), of deployed service men and women. To receive a quilt, please submit this completed form along with nine photographs (digital format that is emailed is preferred) that will help the child cope during the parent's deployment. As all materials and services are donated, there is no fee for this program.

Parent/Guardian Last Name: _____ Soldier/Airman Name _____

First Name: _____ Military Unit: _____

Please check branch of service:

Army USMC Navy Air Force USCG National Guard Air Guard Reserve

Child(ren) Name and Age: _____

Address: _____

Phone: _____ Email: _____

ASYMCA/Operation Kid Comfort Release:

The Armed Services YMCA is actively pursuing corporate, business and individual support for Operation Kid Comfort and the many other programs we offer. With your permission, we may use photographs provided for these projects, as well as photographs of the finished quilts and photographs taken at Operation Kid Comfort workshops and events for these purposes. Please read our privacy statement and approve or disapprove the use of your image, the image of your child(ren) and/or your spouse below. Please note that 6-9 high resolution digital photos are preferred and we will NOT be able to return any hard copies of photographs sent.

Armed Services YMCA Privacy Policy

We do not disclose any nonpublic personal information about you to anyone, except as permitted by law. We restrict access to your personal information to those employees and volunteers who need to know that information to provide products and/or services to you. We maintain physical, electronic and procedural safeguards that comply with federal standards to guard your nonpublic personal information.

I give permission for photographic images of my spouse, my child(ren), my family and myself to be used for ASYMCA/Operation Kid Comfort media, promotional and fundraising purposes.

I DO NOT give permission photographic images of my spouse, my child(ren), my family and myself to be used for ASYMCA/Operation Kid Comfort media, promotional and fundraising purposes.

Signature: _____ Date: _____

Please return form to:
Project Strong Communities
Fairgrounds YMCA
585 Rand Drive
Watertown, NY 13601-3323
Phone: (315) 755-2016
Fax: (315) 755-9623
okcfordrum@yahoo.com

For Office Use Only

_____ Date Received _____ Date Delivered
_____ Date Scanned _____ Date Completed
_____ Date Printed
_____ Date Issued to Volunteer Volunteer Name _____ Phone _____