



Foster & Adoptive Care Coalition
FOR EVERY CHILD... A PLACE TO CALL HOME

Birthday Buddy Application

Only children in foster care qualify for the Birthday Buddy program. To apply for a Birthday Buddy, the foster parent or case manager must fill out this application in its entirety. Applications must be submitted at least one month prior to the child's birthday, and no earlier than four months before the child's birthday.

Today's Date

YOUR CONTACT INFORMATION

Your name

Your relationship to child

Address

City, State Zip

Home phone

Cell phone

Work Phone

E-mail address

_____ will be ____ years old on _____
Name of foster child (First name ONLY)

Is this application being submitted no earlier than four months before the child's birthday?
Yes No

Is this application being submitted at least one month in advance of the child's birthday?
Yes No



FOSTER CHILD INFORMATION

Name of child's caseworker

Phone numbers of child's caseworker

Do you have guardianship or have you adopted this child?

Yes No

We will use the following information to write a short profile about the child to post on the Birthday Buddy page on our website:

(1) What would the child like for his / her birthday? Please be specific and list items valued at \$25 or under:

(2) Describe the child's personality, special talents and / or interests, giving specific details:

(3) How long has the child been in foster care?

RELEASE FORM

By completing and signing this application, I hereby request to enroll the foster child in my physical custody in the Foster & Adoptive Care Coalition's Birthday Buddy program.

- (1) I understand there is no guarantee that my foster child will be matched with a Birthday Buddy. I understand that I will be contacted if the child is matched;
- (2) I understand that the Birthday Buddy program is completely dependent on the generosity and responsibility of others. I understand that even if my foster child is matched with a Birthday Buddy, circumstances beyond the Coalition's control may prevent my foster child from receiving presents through the Birthday Buddy program.
- (3) If my foster child is matched with a Birthday Buddy, I agree to pick up the donated birthday presents in a timely fashion. I understand that I must pick up these birthday presents at one of the Birthday Buddy Coordinators' homes in **Creve Coeur, Missouri** or **Waterloo, Illinois**.
- (4) I promise to inform the Coalition if the foster child is removed from my physical custody before his / her birthday.
- (5) I promise that we will write a thank you note to the Birthday Buddy within 14 days of receiving the birthday present. I will send the thank you note to the Birthday Buddy Coordinator, to be forwarded to the Birthday Buddy.
- (6) I attest that the information in this Birthday Buddy application is true to the best of my knowledge and belief.

Foster parent's signature

Date

You can mail or fax your application to Shelley Thomas-Benke at:

Foster & Adoptive Care Coalition
111 North Seventh Street
Suite 402
St. Louis, MO 63101

Fax: 314.241.0715