



NEW BALTIMORE GOODFELLOWS

No Child Without a Christmas

P.O. Box 82 • New Baltimore, Michigan • 48047

October 1, 2026

The New Baltimore Goodfellows are now accepting applications for their “No Child Without a Christmas” Holiday Program from October 1, 2026, to December 1, 2026. Christmas gifts are given to children through age 15. High school students above 15 may be considered also for the Christmas Program.

Our program is now extending through the year bringing gifts to the children of our area at Christmas and during our ‘**Christmas in July**’ Program starting in 2027. ***More details about our new ‘Christmas in July’ Program will be provided to all approved applicants in the new year.***

Applications are available from any Anchor Bay School, and the New Baltimore City office. Completed applications can be returned to either of the above locations or mailed directly to New Baltimore Goodfellows PO Box 82 New Baltimore MI 48047. You can also email completed Applications to nbgoodfellows@yahoo.com.

****Applications must include all required information****

- Proof of Anchor Bay School District Residency
 - Examples: copy of a current driver’s license or a utility bill
- Signed application by a Parent or Guardian
- A VALID phone number must be on the application
 - Phone number is necessary to notify you of the date you will receive the gift
- A copy of the Birth Certificate for each child is required
- Proof of Income for the family is required
 - An example is a copy of a current Bridge Card

NO PHONE CALL REFERRALS WILL BE ACCEPTED

DUE DATE: TUESDAY, DECEMBER 1, 2026



P.O. Box 82
New Baltimore, MI 48047

PLEASE COMPLETE EACH SECTION OF THE ENTIRE APPLICATION

DUE DATE: 12/1/26

- Please Print -

Mother: First Name

Last Name

Address

City/State/Zip

Father: First Name

Last Name

Address

City/State/Zip

**Attach copies of Proof of Income, Copies of Driver's License with Current Address
And Birth Certificate for All Children**

-List the Actual Age of Each Child-

BOY	Age	Last Name/First Name	GIRL	Age	Last Name/First Name
1.			1.		
2.			2.		
3.			3.		
4.			4.		
5.			5.		
6.			6.		

Parent/Guardian Signature

Print Name

Date

Phone

OFFICE USE ONLY

Approved

Disapproved (Reason)

Notified By

Date