2025 HASTINGS GOODFELLOWS

Applications accepted Nov. 3 to Nov. 30

Date: _____

Applicants name: _____

Address: _____

Town: _____ Phone: _____

Email: _____

Please list ALL persons living in your home, including yourself:

Your name: _____ Age: _____ Male: _____ Female: _____

Other family members: (Age and gender information required for determining toy gifts for children up to age 12.)

Name: _____ Age: _____ Male: _____ Female: _____

Name: _____ Age: _____ Male: _____ Female: _____

Name: _____ Age: _____ Male: _____ Female: _____

Name: _____ Age: _____ Male: _____ Female: _____

Name: _____ Age: _____ Male: _____ Female: _____

Name: _____ Age: _____ Male: _____ Female: _____

Name: _____ Age: _____ Male: _____ Female: _____

Name: _____ Age: _____ Male: _____ Female: _____

Name: _____ Age: _____ Male: _____ Female: _____

I am filling this out on behalf of someone else. YES/NO

If yes, list your name: _____ Phone number:_____

Mail this application to Goodfellows, P.O. Box 788, Hastings, NE, 68902 or drop it off at the Hastings Tribune at 902 W. Second St.

If accepted you will be notified via mail. Curb-side pick-up and curb-side delivery of boxes is scheduled for Dec. 18 through Dec. 20, 2025.