TAYLOR FAITH MINISTRIES

Clothes Request Form

Your Name _____ Organization _____

Email _____ Phone # _____ Date _____

Gender of Recipient	Age of Recipient	Desired Clothes Type (Pants, Shirt, etc.)	Clothes Size	Clothes Age Group
☐ Male ☐ Female				☐ Toddler ☐ Youth ☐ Adult
☐ Male ☐ Female				☐ Toddler ☐ Youth ☐ Adult
☐ Male ☐ Female				☐ Toddler ☐ Youth ☐ Adult
☐ Male ☐ Female				☐ Toddler ☐ Youth ☐ Adult
☐ Male ☐ Female				☐ Toddler ☐ Youth ☐ Adult
☐ Male ☐ Female				☐ Toddler ☐ Youth ☐ Adult
☐ Male ☐ Female				☐ Toddler ☐ Youth ☐ Adult
☐ Male ☐ Female				☐ Toddler ☐ Youth ☐ Adult
☐ Male ☐ Female				☐ Toddler ☐ Youth ☐ Adult
☐ Male ☐ Female				☐ Toddler ☐ Youth ☐ Adult
☐ Male ☐ Female				☐ Toddler ☐ Youth ☐ Adult
☐ Male ☐ Female				☐ Toddler ☐ Youth ☐ Adult
☐ Male ☐ Female				☐ Toddler ☐ Youth ☐ Adult
☐ Male ☐ Female				☐ Toddler ☐ Youth ☐ Adult
☐ Male ☐ Female				☐ Toddler ☐ Youth ☐ Adult
☐ Male ☐ Female				☐ Toddler ☐ Youth ☐ Adult
☐ Male ☐ Female				☐ Toddler ☐ Youth ☐ Adult
☐ Male ☐ Female				☐ Toddler ☐ Youth ☐ Adult