



Family Adoption Information

Date: _____ - _____ - 2020

PO Box 432
Marysville, OH 43040
937-303-9453
www.caretrain.org
ctadopt@rrohio.com

Contact Name: _____

Group Requesting Names: _____

Phone Number: _____

Fax Number: _____

E-Mail Address: _____

Best Time to Contact: _____

Because of the Covid - 19 concerns, we have developed three (3) adoption options for this year. Please check one option below:

1) If you would like to provide toys to a child(ren), we will provide names and wish lists for you to deliver directly to the family. We will not be holding a distribution.

2) If you would like to provide a gift card based upon the wish list of a child(ren), you can return a gift card for the Child(ren) in an envelope provided thru our office. Care Train will deliver to them.

3) You may wish to only provide a monetary donation at <https://www.caretrain.org/donate/> or mail to the Care Train office at the above address and Care Train will provide gift card(s) to the family for their purchase of toys for their children.

Number of children you wish to adopt? _____

Person/ Group will provide Check one:

Toys Only: _____ Food Only: _____ Toys & Food: _____