



The Evelyn Louise Edwards  
**COLLEGE CARE PACKAGE / BOOK**  
“The ELE Program”  
Gift Packages for our College Attendees



Student Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

School Name: \_\_\_\_\_

School Address (where you receive your mail): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List All Known Allergies: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Birthdate (month & day) : \_\_\_\_\_ age \_\_\_\_\_

Local New Philadelphia Contact: Name \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Relationship to Student \_\_\_\_\_

Please save a copy of the form, then email the saved copy to: [naviapayton@gmail.com](mailto:naviapayton@gmail.com)