



Special Delivery Package Request Form

Send someone the gift of the hope and love of Christ today with Joni and Friends Special Delivery program. Please fill in the following information and mail or fax it to:

Joni and Friends ATTN: Special Delivery
PO Box 3333
Agoura Hills, CA 91376-3333
Fax: (818) 707-5660

YOUR INFORMATION

Name: _____ Date: _____

Phone: _____ Email: _____

Relationship to recipient: _____

RECIPIENT INFORMATION

Name: _____ Age: _____

Home Phone: _____ Alternate Phone: _____

Name on the enclosure card (i.e. sent in the request of): _____

Recipient's disability and/or relevant information/circumstances: _____

Type of Special Delivery items/gifts requested/suggested: _____

Comments: _____

DELIVERY INFORMATION

Package is being personally delivered. Name of person: _____

Package is to be shipped. Shipping information:

Name of Facility / Living Center / Hospital, etc.: _____

Shipping Address: _____

City: _____ State: _____ Zip: _____

****FOR INTERNAL USE ONLY, PLEASE DO NOT WRITE BELOW THIS LINE:****

Package contents: _____

Package given to: _____ Date: _____

Date package shipped: _____

Name on enclosure card: _____

Prepared by: _____