



# Beds Equal Dreams Bed Placement Request

## What is the Beds Equal Dreams Program?

Working in partnership with Harrison United Methodist Church, the Beds Equal Dreams Program, provides new beds, linens, and pajamas to elementary school age children who have been identified as needing a bed. Our hope is that a bed of their own will improve the quality of the child’s sleep impacting him/her intellectually, physically, emotionally, and spiritually. **The Program only serves children who do NOT currently have a bed of their own.** Children who share with other family members are eligible.

Beds Equal Dreams will distribute beds on a weekend date in the \_\_\_\_\_ Elementary School parking lot only. You are responsible for pick-up of the bed(s) and providing appropriate transportation.

***In order to request a bed for your child, please complete this form and return it to the guidance counselor who referred you to us. The family will be contacted via email or via phone. Please write clearly.***

## Recipient Information

Child’s Name \_\_\_\_\_ Gender \_\_\_\_\_ Age \_\_\_\_\_  
First Last

Teacher’s Name \_\_\_\_\_ Grade \_\_\_\_\_ Pajama size \_\_\_\_\_

School \_\_\_\_\_

Favorite Color/Interests \_\_\_\_\_

Primary Parent/Guardian \_\_\_\_\_ Zip Code \_\_\_\_\_  
First Last

Phone number(s) Home \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Cell \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Email \_\_\_\_\_

**Bed/Linen Options:** Please select one of the following choices by initialing on the blank.

\_\_\_\_\_ We do not have space for a bed. We would like to receive **linens only**. I certify that  
Initials the linens will be provided to a child who does not currently have what is being requested and does not have the ability to attain the items by some other means.

\_\_\_\_\_ We do not have space for a twin bed, but would appreciate an **inflatable twin  
Initials mattress and accompanying linens**. I certify that the linens will be provided to a child who does not currently have what is being requested and does not have the ability to attain the items by some other means.



\_\_\_\_\_ We want a **traditional twin mattress, frame, and accompanying linens**. I certify that  
Initials the bed and linens will be provided to a child who does not currently have their own  
bed and does not have the ability to attain one by some other means.

There is a small charge of \$10 for every bed provided.

**Additional referrals:** Please list student(s) in home who also need a bed. Students must attend a school in the Fort Mill school district (PreK-12).

Child's Name \_\_\_\_\_ Gender \_\_\_\_\_ Age \_\_\_\_\_ Pajama Size \_\_\_\_\_  
First Last

Favorite Color/Interests \_\_\_\_\_

Child's Name \_\_\_\_\_ Gender \_\_\_\_\_ Age \_\_\_\_\_ Pajama Size \_\_\_\_\_  
First Last

Favorite Color/Interests \_\_\_\_\_

I give my permission to Beds Equal Dreams to use pictures of my children in promoting ministry information for Beds Equal Dreams.

Parents Signature \_\_\_\_\_