



intermountain
Caring Solutions ■ Strong Families ■ Healthy Communities

Wish List

Fall/Winter 2018



Therapeutic Education Services Needs

- Pens and pencils
- Colored pencils
- Pencil sharpeners - electric
- Glue sticks
- Dry erase markers
- Art supplies: paint, paint brushes, colored paper, ribbon, etc
- Construction paper
- Scrabble Jr.
- Water bottles
- Bean bag chairs
- Theraputty
- Wobble chairs
- Raindrop swing



- Body Sox
- Reusable ice cubes
- Sensory items: hand fidgets, oral sensory chews, TheraBands, egg chairs
- Tactile sensory ball
- Wacky Tracks
- Cube snakes
- Storage container
- Head phones for iPad or computer (not ear buds)
- Computer speakers or sound bar
- Small sofa
- Gift cards for Amazon.com for curriculum



Community Services Needs

- Theraputty
- Building blocks
- Number line
- Sand tray and accessories
- Hand puppets
- Dress up clothes
- Doll house and accessories
- Cash register and play money
- Play food and dishes
- Dolls and accessories
- Maze cube
- Jigsaw puzzles
- Cones and rubber dots



- Games:
 - Candy Land
 - Operation
 - Simon
 - Bop-it
 - Kerplunk
 - Mouse Trap
 - Don't Break the Ice
 - Memory
- Weighted blanket
- Body Sox
- Wiggle seat
- Small parachute



Providence Home Needs

- Coloring books
- Markers
- Gel pens
- Canvases for art
- Play Doh
- Sidewalk chalk
- Hula hoops
- Soccer nets
- Inexpensive digital cameras or disposable cameras



- Outdoor/patio furniture
- Picnic tables
- Mixer
- Metal spatula



Gift cards (Target, Costco, Amazon.com etc.) so that staff is able to purchase items that are needed year round.

***You truly are a partner in creating strong and healthy families!
Your gift helps create the caring and comfortable environment the children need to
heal!***

We appreciate your consideration during this busy time of the year. In an attempt to offer the children safe and high quality provisions that will last, we ask that only new items be gifted to Intermountain. For those of you not wishing to spend extra time shopping, we gladly accept cash donations.

Donation Record Form

*Please fill out and enclose/bring with your donation.
An acknowledgement of your gift will be mailed to you. Thank you!*

Name _____

Representing (Organization Name) _____

Address _____

City _____ State _____ Zip _____

Phone (day) _____ (evening) _____

E-Mail Address _____

Description of Donation: _____

Value ~ Necessary to document community support \$ _____

The IRS does not allow Intermountain to place a value on donations.

--OR-- Enclosed is a check made payable to Intermountain and marked "Flathead Wish List" for items most needed.

Received by _____ Date _____

Thank you! Your gift to our children is deeply appreciated.

**In-kind donations for Intermountain Services in the Flathead can be delivered
Monday through Friday from 8:00 am to 5:00 pm to:**

Kalispell Child and Family Therapy Clinic
322 2nd Ave. West, Suite A
Kalispell, MT 59901
(406) 755-4022

