

Mobile Food Pantry Registration Form



SECTIONS ONE, THREE, and FOUR MUST BE COMPLETED IN FULL

SECTION ONE: Mobile Food Pantry Client Information

MUST PROVIDE A VALID DRIVER'S LICENSE OR STATE I.D. FOR VERIFICATION

First name:	Last name:	
Street address:		
City:	State:	Zip code:
County:	Phone number:	
Number in Household:	Date of Birth	Race:

SECTION TWO: Optional Authorization in your Absence

Complete this section if you plan to have someone other than yourself pick up your mobile food pantry food. ***If you are not registering in person, you must provide this completed form along with a copy of your valid Driver's License or State I.D. ***

I authorize _____ to collect food
Printed First and Last Name
for me in my absence.

SECTION THREE: Acknowledgement of Accuracy

I, _____, acknowledge that the
Printed First and Last Name
above information is true and accurate.

Signature

SECTION FOUR ON BACK

SECTION FOUR: Household Information

Complete this section if more than one person lives in the household. Must give complete information for each person living in the household.

HOUSEHOLD MEMBER 2

First name:

Last name:

Date of birth:

Gender: M F

Race:

Relationship to client:

HOUSEHOLD MEMBER 3

First name:

Last name:

Date of birth:

Gender: M F

Race:

Relationship to client:

HOUSEHOLD MEMBER 4

First name:

Last name:

Date of birth:

Gender: M F

Race:

Relationship to client:

HOUSEHOLD MEMBER 5

First name:

Last name:

Date of birth:

Gender: M F

Race:

Relationship to client:

HOUSEHOLD MEMBER 6

First name:

Last name:

Date of birth:

Gender: M F

Race:

Relationship to client: