

Date:

Last Name:	First Name:
Phone:	Email:
Address:	

PLEASE LIST ALL CURRENT HOUSEHOLD MEMBERS		
Name	Relationship	Birthdate

Client is a client of :

Food Bank

Resource Center

Household is eligible for _____ items/month

If I cannot attend on a distribution day, the following individual(s) are allowed to pick up items for me.

Client Signature

date

Staff Signature

PROGRAM GUIDELINES

Must be current client of Orcas Community Resource Center or Orcas Island Food Bank Household may shop at the Coates Cabinet once per month either at a scheduled Resource Center appointment or the 1st and 3rd Tuesday of the month from 3;30pm-5:00pm. Each household is eligible for a base of five items and one item per additional household member. *Example: A Household of 3 would receive 5 items + 2 additional for a total of 7 items per month.*