NON	FOOD	FORM
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Date:	
Card Number:	
Client Name:	

Dear Client,

Occasionally, we have clothing (shirts, pants, shoes, etc.) to give you. In order to provide correct sizes, please complete the form below for all registered members in your family with the exact size for all.

NUMBER OF REGISTERED PEOPLE: _____

	Member 1	Member 2	Member 3	Member 4	Member 5	Member 6	Member 7
Gender							
Age							
Shirt Size		(i)					
Pant Size							
Shoe Size							

PLEASE RETURN THIS FORM NEXT TIME YOU PICK UP YOUR FOOD