

# NORTH COUNTRY FOOD BANK, INC. – FOOD OUTREACH REGISTRATION FORM

Date \_\_\_\_\_ Location/City of Distribution \_\_\_\_\_

This program is designed to help low-income families and families in crisis. There are no qualifications for participation. *The information you give will in no way prevent you from receiving food.* The information you share will help us better serve you and others in your area. Thank you in advance for helping us by completing this form and providing valuable information.

Name (Please Print) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

**Please indicate the number of people in your household:**

Number of children (0 – 5 years old): \_\_\_\_\_

Number of children (6 – 18 years old): \_\_\_\_\_

Number of adults (19 - 64 years old): \_\_\_\_\_

Number of seniors (65+ years old): \_\_\_\_\_

**Total number living in household:** \_\_\_\_\_

**Please check your race/ethnicity:**

- |  |  |
|--|--|
| <input type="checkbox"/> African         | <input type="checkbox"/> African American                |
| <input type="checkbox"/> American Indian | <input type="checkbox"/> Asian/SE Asian Pacific Islander |
| <input type="checkbox"/> Caucasian/White | <input type="checkbox"/> Hispanic/Chicano/Latino         |
| <input type="checkbox"/> Multiracial     | <input type="checkbox"/> Other                           |
| <input type="checkbox"/> Race Unknown    |  |

**Please check the box that most closely represents your household size and total household gross annual income:**

**Total number persons living in household**

	<i>100% or below</i>	<i>100% to 200%</i>	<i>Over 200%</i>
<b>1</b>	<input type="checkbox"/> \$0 - \$9,799	<input type="checkbox"/> \$9,800 - \$19,600	<input type="checkbox"/> more than \$19,600
<b>2</b>	<input type="checkbox"/> \$0 - \$13,199	<input type="checkbox"/> \$13,200 - \$26,400	<input type="checkbox"/> more than \$26,400
<b>3</b>	<input type="checkbox"/> \$0 - \$16,599	<input type="checkbox"/> \$16,600 - \$33,200	<input type="checkbox"/> more than \$33,200
<b>4</b>	<input type="checkbox"/> \$0 - \$19,999	<input type="checkbox"/> \$20,000 - \$40,000	<input type="checkbox"/> more than \$40,000
<b>5</b>	<input type="checkbox"/> \$0 - \$23,399	<input type="checkbox"/> \$23,400 - \$46,800	<input type="checkbox"/> more than \$46,800
<b>6</b>	<input type="checkbox"/> \$0 - \$26,799	<input type="checkbox"/> \$26,800 - \$53,600	<input type="checkbox"/> more than \$53,600
<b>7</b>	<input type="checkbox"/> \$0 - \$33,599	<input type="checkbox"/> \$33,600 - \$67,200	<input type="checkbox"/> more than \$67,200
<b>8 +</b>			

**Is your family in crisis?**     **Yes**     **No**

**LIABILITY WAIVER:** I WILL NOT hold North Country Food Bank, Inc. or their agents or representatives responsible for damages or liabilities incurred as a result of the items or products given to me as a donation. All food and/or items are given to me as is with any and all faults and/or defects as a donation. I understand that the final judgment of quality or suitability for use is with the person accepting the donation. This food and/or items are distributed as a donation for personal use only and are NOT TO BE SOLD UNDER ANY CONDITION. I am 18 years of age or older.

**Signed:** \_\_\_\_\_

