

# FOOTHILLS FOOD BANK

## CLIENT INTAKE FORM

DATE \_\_\_\_\_

NAME \_\_\_\_\_

GENDER (M/F) \_\_\_\_\_

HOUSEHOLD TOTAL \_\_\_\_\_

HOMELESS (Y/N) \_\_\_\_\_

ADDRESS \_\_\_\_\_

APT # \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_

ZIP \_\_\_\_\_

PHONE # \_\_\_\_\_

EMAIL \_\_\_\_\_

BIRTHDATE \_\_\_\_\_

VETERAN (Y/N) \_\_\_\_\_

DOGS # \_\_\_\_\_

CATS # \_\_\_\_\_

**VERIFICATIONS**

ID \_\_\_\_\_

DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_

DATE \_\_\_\_\_

**ADDITIONAL HOUSEHOLD MEMBERS**

	NAME	BIRTHDATE	RELATIONSHIP	M/F	VERIFICATIONS	
					ID	ADDRESS
1.	_____	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____	_____
6.	_____	_____	_____	_____	_____	_____

HOW DID YOU HEAR ABOUT THE FOOD BANK? \_\_\_\_\_

CIRCUMSTANCES \_\_\_\_\_

DIETARY NOTES \_\_\_\_\_

ADDITIONAL NOTES \_\_\_\_\_