## Nazareth Area Food Bank Registration Form

Food will only be distributed to the person registered

## **Personal Information**

Please c	complete the following section regarding your personal	information.
Name		
Age		
Date of Birth		
Home Phone Number		
Cell Phone Number		
Street Address		
City, State and Zip Code		
E-mail address		
	you are unable to pick up your food, ple n to whom you give permission to pick u	
Proof of residen	Residency Information cy is required at the NAFB. Please bring two forms of re	esidency listed helow
Troop of residen	Driver's License	issucincy listed below.
	Water/Sewer Bill	
	Electric Bill	
	Other	
Please .	Specify:	

## **Household Information**

Please provide the listed information for the people living in your household.

Total Number	Total Number	
of <b>Adults</b>	of <b>Children</b>	

Family Member's Name	Age	Date of Birth	Relationship

## **Terms and Conditions**

By signing this form, I confirm that all the above information is correct. I also agree to follow the guidelines set forth by the NAFB. This prohibits anyone from redistributing, reselling and/or returning the food provided charitably by the NAFB. If I choose to redistribute or resell the food, I will no longer be able to receive any food from the Nazareth Area Food Bank.

Signature	
Date	