



# Food Application Form ~ Bountiful Community Food Pantry

480 East 150 North, Bountiful, Utah Mon. – Fri. 11am. – 1pm., Tues. Wed. Thurs. 6pm-8pm, Sat. 10am-Noon

(Please be here an hour before closing) Resident of DAVIS COUNTY **ONLY**

HOPE BEGINS HERE

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ TODAY'S DATE: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

## A. Family member information (including your information)

	First & Last Name	Birth Date MM/DD/YYYY	M/ F	Employed Yes or No
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____
7.	_____	_____	_____	_____
8.	_____	_____	_____	_____
9.	_____	_____	_____	_____
10.	_____	_____	_____	_____

### Pantry Use Only

Check when completed:

- Applicant lives in Davis County
- Pantry of Choice signed
- Applicant and volunteer signed the Hold Harmless Statement and Release of info
- Photo ID for applicant and children 18 yrs.
- Birth certificate for children under 18 yrs.
- Proof of residency (utility bill, lease agreement, mortgage agreement)
- Verification of income (pay stub, SS, Disability, child support) OR signed unemployed form
- Resources discussed \_\_\_\_\_

B. Combined GROSS income of everyone in household: \$ \_\_\_\_\_ per month

C. Is anyone authorized to pick up food for you? (If so, please circle one) YES or NO  
Name of person who you want to pick up food: \_\_\_\_\_

D. Total number of family members living in your household (do not include unborn Children or temporary guest): \_\_\_\_\_

E. Family Ethnic background (please circle one):  
Native American, Hispanic, African American, Asian/Pacific Islander, Caucasian, Other

F. Head of household statistics (please circle one):  
Single Parent with children, two parents with children, single person, two people, other

- New card issued: Card number \_\_\_\_\_
- Date issued \_\_\_\_\_
- Information checked by \_\_\_\_\_