Client Application

Please print clearly when completing the required registration information below:

- Address verification requires providing dated mail, such as a utility bill or rent receipt.
- A picture ID must be provided for everyone in the household over the age of 18.

Primary Client: (One adult per household is listed as primary)

First Name: _____ Last Name: _____

Address: _____

Phone: _____ Form of Verification: _____

Email Address: _____

Household Total: _____Adults _____ Children

Full name of others living in household	**Picture ID/School**	**Date of Birth (MMDDYY)**
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I authorize the Wrentham Food Pantry (WFP) to verify all the information I have listed for my household on this application. I understand I am responsible for reporting changes to household status to the WFP when they occur. I have received a copy of the "Client Guidelines" and agree to abide by them.

Primary Contact Signature: _____Date: _____

WFP Volunteer Name: _____Date: _____