

CORNERSTONE FOOD CUPBOARD
CLIENT 2020-2021 REGISTRATION

Name _____
 (if more than one shopper, put both names)

Address: Street, Apartment Number, and Town

Phone Number _____

Total number of Individuals living in your household _____

How many of your household are:

Children (0-17)	Adults (18-59)	Seniors (60+)

Males	Females

Black	White	Hispanic	Asian or Pac. Isl.	Other

Eligibility: Circle the box below that is the number of people in your household. You are eligible to receive food from the Cupboard if your total annual household income is less than the amount listed for a household of your size.

Household Size	1	2	3	4	5	6	7	8*
Annual Income	29,986	40,514	51,042	61,570	72,098	82,626	93,154	103,682

*for each additional person add \$10,514

For staff only

Initials and date
