CORNERSTONE FOOD CUPBOARD

CLIENT 2022-2023 REGISTRATION

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(If more than one shopper, put both names.)

Address: **Street and Apartment Number (if any)**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: **Town and Zip Code** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Total number** of individuals living in your household \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Optional Questions- How many of the individuals in your household are:

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

|  |  |
| --- | --- |
| Males | Females |
|  |  |

**Required eligibility question** - 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 | 31,937 | 43,029 | 54,121 | 65,213 | 76,305 | 87,397 | 94,282 | 109,581 |

\*for each additional person add $11,092

***If any of your information changes, please let us know so we can update your record.***

Initials and date

**For staff only**