

BEREAN BAPTIST CHURCH
Proclaiming CHRIST in the 21st Century
517 Glensford Drive
Fayetteville, North Carolina 28304

Food Pantry Information Form

Date: _____

Name: _____

Spouse Name: _____

Address: _____

Telephone No.: Home _____ Cell _____

Occupation: _____

Employer: _____

Address: _____

Total Household Income: _____

Persons in Household: Adults: _____

Children: _____ Ages _____

Nature of Crisis: (i.e. sickness, job layoff, etc.) _____

Food Allergies: _____

Note: Food distribution may be given to an individual/household not more than twice in a twelve-month period.

Approved

By: _____

Disapproved

Reason: _____

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1. After approval from appropriate official, the requestor may obtain food and/or available hygiene items from, "The PANTRY".
2. Individual/household may obtain items from the pantry no more than two times in a twelve month period
3. Requests can be made Monday thru Thursday during regular work hours. 9:00 a.m. to 4:00 p.m. and must be made the day prior to pick-up.
4. Pick-up of Food Items will be from 9:00 a.m. until 12:00 p.m.
5. Individuals must express what type of cooking means and storage means they have available in order to properly provide food items. (i.e. Microwave, Range Oven, Freezer, etc.)
6. Individuals must provide a means of identification for themselves, and spouse if applicable.

By signing below the requestor agrees to the terms listed above.

Requestors Signature

Approving Authority

Copy of Identification: