



(928) 775-5255

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SERVING YAVAPAI COUNTY SINCE 1992

Client ID No. _____ **Nutritional Food Box Application**

Assigned by Yavapai Food Bank

A (0-5) _____ B (6-12) _____ C (13-18) _____ D (19-25) _____ E (26-39) _____ F (40-59) _____ G (60-69) _____ H (70+) _____

FILL OUT ALL INFORMATION BELOW THIS LINE. PLEASE PRINT.

Date: _____

☐ Single ☐ Married ☐ Head of Household

Applicant Name: _____ ☐ Male ☐ Female
Last First Age

Husband/wife or *significant other: _____ ☐ Male ☐ Female
* (together at least 2 years) Last First Age

Children under the age of 18, and elderly or disabled members of household: (List names, ages, male or female and relationship.)

Mailing Address: _____
Street Address (Apt.#, P.O. Box, etc.) City State Zip

Physical location if different from above: _____

Phone No. : _____ **Message Phone No.:** _____

What is your average annual, monthly or weekly income? _____ ☐ Annual ☐ Monthly ☐ Weekly ☐ Other

Source of income: ☐ Wages or Salary ☐ Disability ☐ SSI ☐ Social Security ☐ DES ☐ Other _____

Do you receive food stamps? ☐ Yes ☐ No **If "No," have you applied?** _____

Do you go to any other food bank or pantry for food? ☐ Yes ☐ No **If yes, which one?** _____

PLEASE ACKNOWLEDGE BY SIGNING BELOW THAT YOU HAVE READ AND UNDERSTAND THE FOLLOWING STATEMENT:

I hereby warrant and guarantee to Yavapai Food Bank, and their officers, that I will hold same, harmless from any and all liabilities, claims, losses, causes of judicial action, suits of law or in equity, or any obligation whatsoever arising out of or attributed to any action on my part in connection with Yavapai Food Bank, Inc., whether I am on their property as a client, volunteer or for any other reason. I understand that Yavapai Food Bank, Inc. does not and will not provide workmen's compensation or any other insurance for injuries incurred while on their property. This also includes causes of judicial action, suits of law or in equity, or any obligation whatsoever arising out of or attributed to any action on my part in connection with the receiving, storage and/or use of the items supplied to me by Yavapai Food Bank.

Signature of applicant: _____ Date: _____

DO NOT WRITE BELOW THIS LINE:

INFORMATION VERIFICATION:

ID: ☐ Driver's License ☐ Social Security Card ☐ Birth Certificate ☐ Other _____

INCOME: ☐ Paycheck stub ☐ Social Security Letter ☐ DES Letter ☐ SSI Letter ☐ Tax Return ☐ Other _____

Eligible box(s): ☐ General Nutrition _____ Volunteer Initials: _____

☐ Additional information attached. ☐ Confirmed Physical Address

YFB-108-0115

THIS INSTITUTION IS AN EQUAL-OPPORTUNITY PROVIDER.



NOTICE TO ALL CLIENTS

The rules below apply to all individuals picking up food at any time

1. No obscene, offensive, or indecent language will be tolerated by any individual. Note disciplinary procedures below.
2. All clients need to have a qualifying food card to pick up a food box on distribution days. This can be obtained at the front office (red door).
3. When coming in to the parking lot to pick up food, clients must either be waiting in the designated areas or in their car. There should be no wandering through the parking lot. Anyone caught taking anything from anyone else's car will be reported to the police, asked to leave and not allowed to return.
4. At the back overhead door, on food distribution days, all individuals must stand behind the yellow line until any truck or vehicle is unloaded, and until 30 minutes before scheduled time of distribution.
5. Thirty minutes before scheduled distribution time, clients may begin to line up at the entrance to the back of warehouse, and someone will come out and give you a numbered chip. After you receive your chip you can come in and sit down as long as chairs are available, or stand inside and wait for your number to be called, or wait outside in line or in your car if not enough room. Please be available to hear your number. It will be called twice, if no response, the next number will be called. The person at the intake table has the option to take you later when you realize you missed your number or you may have to go to the end of the line.
6. Clients need to bring their own boxes. Limited boxes may be available and will be given to new clients first, then on a first-come, first-serve basis.
7. When your number is called, go to the intake table and hand the worker at the desk your numbered chip and your card. After your card is recorded and you have signed in, you may then go and select your bread while your box is being filled. Sliced bread is sometimes limited, and you will be told if there is a limit on how many loaves of sliced bread you may take.
8. Food boxes are prepared as nutritionally as possible. There may be limited quantities in certain nutritional groups. All donated food we give out while supplies last, is on a first-come, first-serve basis. Because of this, all boxes may not be exactly the same.
9. There are no provisions in the current laws or regulations to mandate ethnic or medical food choices. Please note that it would be difficult and could result in discrimination if we tried based on the types of donated food we receive at different times.
10. When your box is ready, your name will be called.
11. If you need help to your car, carts are available. You may also ask for additional assistance if needed. If using a cart, please take your food box to your car immediately as the carts need to be returned for others to use. We have a limited number of carts. If also picking up commodities or signing up for some other benefit, carts must be returned first.
12. Please note: there should be no walking through the warehouse on the other side of the table for any reason. You may access the front office through the outside front (red) door.
13. RULES FOR CLIENT BEHAVIOR: There is to be no disrespectful language or behavior directed towards any client, staff or volunteer. Racist or sexist language or comments are strictly prohibited.

DISCIPLINARY PROCEDURES:

First offence: You will be verbally warned and a complaint/grievance form will be filed. You may be asked to leave temporarily.

Second offence: You will be asked to leave and a second complaint/grievance form will be filed.

Third offence: You will be asked to leave permanently.

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Yavapai County Food Bank is a 501(c)3 nonprofit privately funded, non-sectarian, charitable organization. For verification go to corporations.azcc.gov.