

SHELLBROOK AND AREA MINISTERIAL FOOD BANK

Christmas Hamper Request Form



Name: _____ Phone # _____

Home Address: _____

Household members:

	Name	Gender (m/f)	Birth month/year	Health Card #
1)	_____	_____	_____	_____
2)	_____	_____	_____	_____
3)	_____	_____	_____	_____
4)	_____	_____	_____	_____
5)	_____	_____	_____	_____
6)	_____	_____	_____	_____

Please list any allergies or health conditions (such as a peanut allergy or diabetes)

List any food items you cannot or will not use: _____

Please circle any household appliances **NOT** available to you:

Fridge Freezer Stove Oven Microwave

Have you applied for a hamper from any other organization Yes / No

If Yes, with who? _____

If you have **not** made use of the Food Bank before, but **have** been in need of food assistance, please tell us what has prevented you from accessing Food Bank services:

Signature: _____

Date: _____

Please return the completed form to any of the local churches or Pastors before
Sunday, December 14th texting Linda at 1-306-960-6879 or email llundy032@gmail.com

or mailed to:

Food Bank
c/o Linda - Co-ordinator
Box 72,
Shellbrook, Sask,
S0J 2E0

before December 14, 2024

this will allow us adequate time to prepare the Hampers.

Please Note: This is a one-time only form. These forms will be shredded to maintain confidentiality.

**Food Hamper Pick-Up will be
Friday, December 19, 5:30-7:30pm
At the Shellbrook Pentecostal Assembly**

