

2017 Ruby's Pantry Food Distribution Registration Form

Date:		Location/City of Distribution:	
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There are no eligibility qualifications for participation.
 All fields are required and will not be shared outside of our organization.
 This registration is required once per year per distribution.

PLEASE PRINT CLEARLY

First Name:		
Last Name:		
Street Addr:		
City:	State:	Zip:
County:		
Cell Phone:		
Home Phone:		
Email:		

Please type entire email address (i.e., someone@domain.com)

Please complete the following for each member in Household (optional)

Age:	Gender (please check one):	M	F
Age:	Gender (please check one):	M	F
Age:	Gender (please check one):	M	F
Age:	Gender (please check one):	M	F
Age:	Gender (please check one):	M	F
Age:	Gender (please check one):	M	F
Total Household Members:			

LIABILITY WAIVER: I WILL NOT hold Ruby's Pantry or their agents or representatives responsible for damages or liabilities incurred as a result of the items or products given to me as a donation. All food and/or items are given to me as is with any and all faults and/or defects as a donation. I understand that the final judgment of quality or suitability for use is with the **person accepting the donation**. This food and/or items are distributed as a donation for personal use only and are **NOT TO BE SOLD UNDER ANY CONDITION**. I am 18 years of age or older. I authorize Ruby's Pantry to use my likeness in a photograph of their publications. Donation is Non-Refundable.

Do not notify me by email of Ruby's Pantry updates: YES

Do not notify me by text of Ruby's Pantry updates: YES

Signed: _____



Last Rev: 10/1216