



Food Bank Intake

Privacy Statement

Personal information is collected in accordance with privacy legislation for the purposes of providing needed services. Personal information is not shared without written consent, and is only provided for the purpose of referral or to provide service at your request.

Please note that non-identifying information is used for statistical purposes, to track the use of services, for public awareness of hunger issues and to improve our services in the future. Information is kept for a maximum of 7 years in accordance with our legal requirements, and is only accessible by staff members providing services that require the information.

Your name and hamper date will appear on the computer program for the hamper program and the daily list on your hamper day. This is accessible only to staff members running the program. Please feel free to ask us any questions you may have about your information and how we use and store it. Respect for your privacy is important to us.

Food Waiver - Samaritan House Ministries Disclaimer of Warranty and Indemnity For Households/Individuals/Families

Samaritan House Ministries, Inc., supplies foodstuffs within our food sharing programs to area households/individuals/families when and if available as determined by Samaritan House Ministries, Inc. By signing this disclaimer, these households/individuals/families hereby acknowledge and agree to the following:

1. Any foodstuffs or other goods received from Samaritan House Ministries, Inc., are accepted by them in "as is" condition. Samaritan House Ministries, Inc., makes no warranty, either expressed or implied, as to the quality, condition or fitness of the goods for the purposes of the households/individuals/families to which they are given.
2. Samaritan House Ministries, Inc. makes no representation as to the quality of the foodstuffs and the households/individuals/families will rely entirely on its own inspection of the foodstuffs as to their suitability and fitness.
3. To waive any claim or right of action it may have for damages or injury suffered by any third party consumption of any goods supplied to the households/individuals/families by Samaritan House Ministries, Inc.
4. To indemnify and hold harmless Samaritan House Ministries, Inc., from and against all claims and actions that may be made against Samaritan House Ministries, Inc., and against all costs, damages, expenses and liabilities which may be sustained or incurred by Samaritan House Ministries, Inc., by reason of the supply of goods to the households/individuals/families.

Dated at Brandon, Manitoba this _____, day of _____, _____.

Signature: _____

Witness: _____

Employee or representative of Samaritan House Ministries, Inc.

Samaritan House Ministries Food Bank Intake Form

Primary Client Information (Please Print)

Last Name: _____ **First Name:** _____ **Middle Initial:** ____

Birthdate: _____ - _____ - _____ **Age:** _____ **Gender:** Female Male **Student ID #:** _____

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Street Address _____ **City/Town:** _____ **Postal Code:** _____

Phone Number: (_____) _____ **Your Household: # of Adults:** _____ **# of Children:** _____

Please check off ONE of the following:

Single-parent/guardian family Two-parent/guardian family Couple, no children Single person Other Undisclosed

How many Adults are in your household in the following categories?

1. # of Post-Sec Students (18+): _____ **2. # of First Nations, Inuit, or Métis (18+):** _____

3. # of New immigrants or refugees (18+): _____ **Year of arrival** _____

Please list others in your household that you are claiming a hamper for:

Last Name	First Name	Gender	Age	Birthdate (YYYY-MM-DD)

Primary source of income: # of adults per household	Housing Type:	Reason for Using Food Bank:		
Employment Income	Own Home	Low Wages/delayed wages		Family break-up
Employment Insurance (EI)	Private rental	Not enough work hours		Other
Social Assistance (EIA)	Rooming House	Unemployed/recent job loss		Undisclosed
Disability Related Benefits	Social (public) rental	Social Assistance/benefits too low	Client Intake Questionnaire:	
Old Age Pension	Band-owned	Cost of housing (rent, mortgage)	1. Referral Source:	
Student Loans/Scholarships	Emergency Shelter	Cost of Utilities (hydro, heat, water, gas)	BU Students' Union	
Canada Child Benefit	Youth home/shelter	Cost of Food	2. Current Food Status:	
Canada Worker Lockdown Benefit (CWLBB)	On the street	Relocation (immigration/moving)		
Canada Recovery Sickness Benefit (CRSB)	With family/friends	Unexpected expense	3. Resources	
Canada Recovery Caregiving Benefit (CRCB)	Other	Sickness/Medical expense		
Other Income	Undisclosed	Debit		
Undisclosed		Natural Disaster (fire/flood)		

Office Use Only

Date: _____ **Entered into System by (Initials):** _____ **Client #** _____