

ELAM EGYPT BAPTIST CHURCH, INC.

OPEN HANDS FOOD PANTRY GUIDELINES

1. First Visit:

- **Non Member of Elam Egypt Baptist Church, INC.**

Each family or individual family member is required to show one of the following forms of identification for each person in the household for whom they wish to claim food including children:

- Head of house and/or all adults 18 yrs. or older
 - ❖ Need photo ID
 - ❖ Each family and/or individual over 18 will be required to bring proof that they live in Effingham or Screven County (Rent or lease agreement or mortgage statement. If you are living with someone they will need to come in with you and bring their photo ID and the mortgage statement, rent or lease agreement and a signed paper stating that you live with them).
 - ❖ Proof of income is needed to register. For each person over 18 we will need proof of income. Pay stub, social security letter, disability letter, unemployment statement. If you are unemployed you will need to sign a form to that effect.
- Children / Babies
 - ❖ All names and DOB's need to be placed on Open Hands Food Pantry information form.

- **Member of Elam Egypt Baptist Church, INC.**

Each family or individual family member is required to complete the Open Hands Food Pantry information form and needs to be approved by food pantry administrative personnel.

2. Food Distribution:

- Food will be distributed on a 60 day basis. Each family seeking need will only be allowed to visit Open Hands Food Pantry every 60 days.
- Open Hands Food Pantry information form must be completed & approved upon each visit.
- A family member must be present to receive food.
- Food pantry will ONLY be administered by Open Hands administrative personnel. All others MUST wait in the social hall for food to be gathered and distributed.
- The amount of distributed food will be at the total discretion of Open Hands Food Pantry administration personnel based on the information given by family or individual seeking need. All age groups will be considered as a separate need.

ELAM EGYPT BAPTIST CHURCH, INC.

Open Hands Food Pantry Application

Date: _____

General Information

First Name: _____ Last Name: _____

Address: _____ County: _____ Zip: _____

Telephone: _____ Email Address: _____

Household Information:

Household Information							
List all Adults and Children Living in the Household							Total Household Members _____
# of Children in Household (0-17)	# of Adults in Household (18-64)			# of Seniors in Household (65+)			
Name	Age	Sex M/F	Relationship to Applicant	Food Allergies	Attend Church		Where
1.							
2.							
3.							
4.							
5.							
6.							

If you answered YES to Food Allergies, please list: _____

List any Dietary Restrictions: _____

Do you have access to the following: (Check all that apply):
 _____ Stove Top _____ Oven _____ Microwave _____ Can Opener _____ Running Water

Is there any food you absolutely can/will not eat: _____

How many times have you visited our food pantry? _____

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Please circle which of the following items you will use. Some items may NOT be available and circling items does not guarantee you will receive:

FOOD:

Soup	Macaroni & Cheese	Peanut Butter	Cereal / Oats
Salmon (Canned)	Jelly / Jam	Ramen Noodles	Canned Vegetables
Rice	Pasta	Instant Potatoes	Canned Meats
Beans	Granola Bars	Spaghetti Sauce	Canned Fruits
Flour	Tea	Oil / Shortening	Cake Mixes / Icing
Noodles	Spaghetti O's	Chicken Broth	Cream of Mushroom

PERSONAL HYGIENE PRODUCTS:

Toothbrushes / toothpaste	Mouthwash	Shave Cream
Soap (Bar)	Body Wash	Shampoo / Conditioner
Hygiene Products (Ladies)	Deodorants	Razors
Laundry Detergent	Brush / Comb	Toilet Tissue
Paper Towels		

The Open Hands Food Pantry is a church run non-profit organization of Elam Egypt Baptist Church, INC. The Open Hands Food Pantry reserves the right to determine who receives food and how often the Pantry may be utilized. The use of the Pantry is a privilege not a right. The re-sale or exchange in any way of any food or item received from The Open Hands Food Pantry is strictly prohibited.

By my signature I acknowledge receipt of free food from Elam Egypt Baptist Church, Inc. Open Hands Ministry. I further understand and agree that by accepting this donated food I freely and voluntarily, with full knowledge, hold harmless and in no way liable or responsible for the quality, condition or packaging of the food, Elam Egypt Baptist Church, and food suppliers.

Signature: _____

Date: _____

Prepared By: _____

Date: _____

No. of Bags Issued: _____