



QUINN CENTER OF SAINT EULALIA

RETURN THIS FORM BY THURSDAY, NOV 16.

Advanced registration is required!

Thanksgiving Box Registration Form - Case Worker

Case Worker Information:

First Name: _____ Last Name: _____

Organization: _____

Participant Information:

First Name: _____ Middle: _____ Last: _____

Address: _____

City: _____ State: _____ Zip code: _____

Phone Number: _____ Email: _____

Race/Ethnicity

- Asian/Asian American
Black/African American
Caucasian/White
Latino/Latina/Latinx
Native American/American Indian/
Alaska Native/Native Hawaiian Pacific Islander
Multi-Racial/Multi-Ethnic
Other -> Please specify: _____

Total Household Size:

Total number (including you): _____

Total Household Gender:

Total number of MALES: _____

Total number of FEMALES: _____

Total number of OTHER gender: _____

Total Household Ages

Please write the age of EACH household member (including you):

Four blank lines for entering household member ages.

Household Income

- Less than \$20,000
\$20,000 - \$34,999
\$35,000 - \$49,999
\$50,000 - \$74,999
More than \$75,000

Household members experiencing disabilities?

- No
Yes - please specify: _____

WHO IS PICKING UP (CHOOSE ONE):

CASEWORKER CLIENT

Case Workers:



Food box pickup will take place on: Monday, November 20 from 9am -1pm (Gym) By appointment only Email: office@quinncenter.org to schedule.

SCAN QR CODE TO SIGN UP FOR A PICKUP TIME

Questions? Call 708.397.6111 or email office@quinncenter.org.

Completed form must be received BY STAFF on time. Sending emails/leaving voicemails is not enough)