**FOOD HAMPER PRE ORDER FORM**

(Must be collected the Wednesday after you lodge this form

between 3.30pm – 4.15pm only)

**Date required: \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_**

|  |  |
| --- | --- |
| Name: | |
| Email: | Phone: |
| Address:  Suburb: Postcode: | |
| Household Details: **(Please Tick)**  Single  Couple  Family -  1 adult + children  2 adults + children  adults only x \_\_\_\_  Number of dependent children: Choose an item.  Child 1: age \_\_\_\_\_\_M/F Child 2: age \_\_\_\_\_\_M/F Child 3: age \_\_\_\_\_\_M/F  Child 4: age \_\_\_\_\_\_M/F Child 4: age \_\_\_\_\_\_M/F Child 5: age \_\_\_\_\_\_M/F  Do you require nappies (if available)? – Size of nappies required: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    Do you have a pet? **If we have pet food available:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Any comments? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Please tick which one is relevant to your current situation below:-  I have been affected by Covid-19 having my employment/work hours cut.  I am unemployed and this is my off-pay week.  I am not receiving any benefits.  I am a pensioner  Other reason – please state \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  I am a 2020/2021 QYFSS financial member  I am NOT a 2020/2021 QYFSS financial member | |

**Please email form back to:** admin@qyfss.org.au