



## Dalgarno Trust Food Bank Form

**Personal Details (Please complete in BLOCK CAPITALS)**

Forename		Surname	
Address		Postcode	
		Kensington & Chelsea resident	YES      NO
		Number of dependent Children (if any)	
Telephone		Email	
Gender	Male / Female	Date of Birth	

**Ethnic Origin**

<b>White</b>	<input type="checkbox"/> British/ English/ Welsh/ Scottish <input type="checkbox"/> Irish <input type="checkbox"/> Gypsy/Irish Traveller <input type="checkbox"/> Any Other White Background .....	<b>Asian or Asian British</b>	<input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Chinese <input type="checkbox"/> Any Other Asian Background .....
<b>Mixed</b>	<input type="checkbox"/> White & Black <input type="checkbox"/> White & Black African <input type="checkbox"/> White & Asian <input type="checkbox"/> Any Other Mixed Background .....	<b>Other Ethnic Group</b>	<input type="checkbox"/> Arab <input type="checkbox"/> Any Other Ethnic Background (please state) .....
<b>Black</b>	<input type="checkbox"/> Caribbean <input type="checkbox"/> African <input type="checkbox"/> Any Other (Please State) .....		

**Do you have a disability or health condition?**

Yes (please describe) \_\_\_\_\_

**Do you have any food allergies?**

Yes (please describe) \_\_\_\_\_       No

**What is your current employment status?**

Employed full-time       Student       Retired       Unemployed  
 Employed part-time       Not Working       Self-employed       Voluntary Work

**How did you find out about our centre?**

Dalgarno Trust Staff       Internet       Seen publicity  
 Word of mouth       Current User

Other (please state) \_\_\_\_\_

Thank you for completing this form. We would like to hold your contact information for our records and to get in touch with you about foodbank activities. Do we have your permission to hold this information?

Please tick here

We do not share your contact details with any person or organisation. We keep them entirely for our records so that we can contact you with any information about the food bank operation.

**Signature**..... **Date**.....