



REGISTERED

*Agency Name*

Household Name (Print)	Children # 0-17 years	Adults # 18-59 years	Seniors # 60+ years	Total # of people	Signature (only one individual to sign per household)
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					
16.					
17.					
18.					
19.					
<b>NEW Families -Totals for the Month</b>					