

# Project Stork, Inc. The Baby Pantry Of Orleans and Genesee Counties Emergency Assistance Application

## Diaper Bank Guidelines

### Requirements & Qualifications

Parents(s)/guardian(s) must provide

- Photo identification
- Proof you are caring for a child 3.5 years or younger (birth record, medicaid letter, etc.)
- Resident of either Genesee or Orleans County

1. Date of application: \_\_\_\_/\_\_\_\_/\_\_\_\_

2. Name of person completing the application:

Last name: \_\_\_\_\_ First name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

3. Relationship to child, please circle:    Parent/guardian                  other

4. Child(ren):

Last name: \_\_\_\_\_ First name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Child(ren):

Last name: \_\_\_\_\_ First name: \_\_\_\_\_

Date of birth: \_\_\_\_\_

\*I release Project Stork, Inc. The Baby Pantry, it's administrative agency, its officers, employees, and volunteers from any liability resulting from Project Stork, Inc. The Baby Pantry distribution and agree to hold them harmless against all liabilities, damages, losses, claims, causes of action and suits of law or inequity or obligation whatsoever arising out of or attributed to any actions during the implementation of the above services.

Please indicate decision by initialing \_\_\_\_\_

Client's Signature and Date	The Baby Pantry Signature

