

# FAMILY BASKET



healthy, affordable food for individuals on social assistance

## DETAILS

\$30/box

1-2 boxes per month

Delivery or pick up options available

*Some individuals may qualify to have payment taken directly from social assistance cheque*

## CONTENTS

Fresh fruit and vegetables

Pantry pack (bread, eggs, pasta, rice & soup)

4L of 2% milk

2 lbs Ground Beef (pick up only)

*\*Contents may vary\**

## HOW TO REGISTER

Fill out the registration form found on the back of this sheet

Submit form to:

REACH at 1350 Osler Street

or via email at [info@reachinregina.ca](mailto:info@reachinregina.ca)

Arrange payment through your case worker,

by calling REACH at 306-347-3224

or e-transferring funds to

[payments@reachinregina.ca](mailto:payments@reachinregina.ca)



# Family Basket

## New Customer Registration Form

Date \_\_\_\_\_ Telephone Number \_\_\_\_\_

Name \_\_\_\_\_

Street Address \_\_\_\_\_

Postal Code \_\_\_\_\_

Circle ONE:            One Box/Month (\$30)            Two Boxes/month (\$60)

Circle ONE:            Delivery            Pick up

### Household Information

Household Members	Age Category	Male	Female
Adults	Over 55		
Adults	19-55		
Youths	13-18		
Children	6-12		
Infants	0-5		
<b>TOTALS</b>			

**Family Worker Name/Phone number:** \_\_\_\_\_

**Information Declaration:** We care about your privacy! The above information is required by REACH (Regina Education & Action on Community Hunger) for administrative purposes and for the gathering of statistical information. We will not give out or share *any* applicant's name, telephone number or street address with any other agency, institution, government department or business. Provided household information and your unique Ministry of Social Services/SAID (Saskatchewan Assured Income for Disability) number may be used for data compilation purposes only. By signing this application, you are agreeing to allow the use of the information described in this declaration.

**Purchase Agreement:** I give my permission to have the Ministry of Social Services/SAID (Saskatchewan Assured Income for Disability) automatically debit my Saskatchewan Assistance Plan cheque \$30 or \$60 per month and to make payment to REACH on my behalf. I also give REACH permission to contact my Family Worker when necessary. I understand and agree that I am responsible for being home for a delivery or picking up my Family Basket at a specified time. I recognize that REACH cannot be responsible for holding a Family Basket beyond the designated times given to me and I agree that my Family Basket will be donated to a charitable feeding program, without any compensation to myself if I am not home for a delivery or do not pick up within the time(s) designated by REACH. I am aware that I must contact REACH if I no longer wish to receive the Family Basket.

Signature \_\_\_\_\_

**REACH**  
**Box 4482 Regina SK S4P3W7**  
**Office: 306-347-3224 Fax: 306-347-0943**  
**Email: info@reachinregina.ca**