

Joseph's Coat Membership Application

Primary adult member must be at least 18 years old

Primary Adult Name _____ Date _____

Email _____ Phone _____

Address _____

City _____ State _____ No. of Registered Family Members _____

Zip _____ I.D. verified by _____

List primary adult & household members for whom you will be shopping.

Name: First & Last	M/F	Date of Birth (Month/Day/Year)	Age	ID Verified By J.C.
Primary Adult				

Bring I.D. for Each Person in Household the First Time You Visit

ADULT I.D.- Government issued ID with address and birth date.

CHILD I. D. - Birth certificate or insurance card with birth date. You must have legal custody of children.

Joseph's Coat Membership is required for furniture requests.

Joseph's Coat Membership Guidelines

Observe limits. Clothing limits reset monthly.

Respect others: Follow the Golden Rule

Children must be under your direct supervision.

Keep clothes on hangers.

Joseph's Coat reserves the right to refuse service to any individual based on the needs of the organization.

My signature indicates that I have read & understand the above and will use the Joseph's Coat premises strictly according to these guidelines. I understand that, by my signature, I hereby relieve Joseph's Coat of Central Ohio, Inc., its volunteers, staff and Board members of all liability for injuries to myself and others I may bring onto the Joseph's Coat premises.

Primary Adult Signature

Date

Additional Family Members

Primary Adult Name _____

Name (PRINT) First & Last Name	M/F	Date of Birth (Month/Day/Year)	Age	ID Verified

Notes: