

**Volunteer Center of Whatcom County-
House 2 Home Virtual Furniture Bank**

Phone: (360) 734-5121 x173



Furniture Request Form:

Email to autumnc@whatcomvolunteer.org

Date		Agency		Referrer		Phone	
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Client Information

Name: Address: City/Zip Code: Phone: Birthdate: Gender:	Ethnicity (<i>select only one</i>):		<input type="checkbox"/> Hispanic or Latino
			<input type="checkbox"/> Not Hispanic or Latino
	Race (<i>select all that apply</i>):		<input type="checkbox"/> Black or African American
			<input type="checkbox"/> American Indian or Alaska Native
			<input type="checkbox"/> Native Hawaiian or other Pacific Islander
Monthly Household Income:			<input type="checkbox"/> White
			<input type="checkbox"/> Asian
# of adults in household: # of Children in household:			<input type="checkbox"/> Declined to Answer
Female head of household:		Preferred language if limited English:	
Client's email address (if available):		Has Client Served in U.S. military:	

Quantity Requested	Item	Quantity Requested	Item
	Bookshelf		End table/Nightstand
	Coffee table		Easy Chair/Loveseat
	Couch		Entertainment Center/Television
	Crib		Kitchen Appliance:
	Desk		Kitchen items: Dishes/Cookware/Utensils
	Dining Set		Lamp (Table or Floor)
	Double Bed/Full		Queen Bed
	Dresser		Twin Bed

Additional info/special furniture requests:
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House 2 Home Network
Virtual Furniture Bank
Furniture and Household
Items Request Form



This section to be completed and signed by the client

Client Name _____

-I give my permission for my caseworker to release my name and address to the Furniture Bank. This may be done electronically. I give the Furniture Bank permission to access and edit information about me on the Volunteer Center of Whatcom County's Furniture Bank Database.

-I understand that the Furniture Bank provides used items and may not be able to provide me with all the items I request. If I have a concern about the services I receive, I understand that I can contact the Furniture Bank's Coordinator to file a complaint.

-I am eligible to receive services from the Furniture Bank due to the following circumstance:
I was in a homeless situation and recently became housed through the Homeless Service Center or one of its partner agencies.

I certify that I understand the information on both pages of the Furniture Request Form and that all of the information I have provided is accurate to the best of my knowledge.

Client Signature

Date