

# JOSEPH'S COAT

OF CENTRAL OHIO

## JOSEPH'S COAT MEMBERSHIP APPLICATION

PRIMARY ADULT MEMBERS MUST BE 18 YEARS OF AGE OR OLDER

You must bring identification for all children aged seventeen and under in your custody. This is a requirement before the first shopping, with no exceptions. This can be a legal document from the court showing you have custody. Any changes to family size, home address, or phone number after completing the Membership application must be current with Joseph's Coat. Anyone over the age of eighteen must have an account. Send your completed computer form by email to [info@josephs-coat.org](mailto:info@josephs-coat.org)

Name Primary Adult \_\_\_\_\_ Date \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Full Address \_\_\_\_\_ Language \_\_\_\_\_

Veteran: Yes No Homeless or Other: Yes No  
Number of family members in each age group below:  
Senior \_\_\_\_ Adult \_\_\_\_ Children \_\_\_\_ Immigrant Yes No  
Nationality \_\_\_\_\_  
Single Parent Family: Yes No  
Disabled: Yes No Birth Country \_\_\_\_\_

last name, first

Name: First & Last	M/F	Date of Birth (Month/Day/Year)	Age	Type of ID Verified by JCwho/date
Primary Adult				

**Bring ID for each person in the household for the first time you visit, no exception.**

**ADULT ID** - Government ID with a current address and birth date. **CHILD ID** - Birth certificate or insurance card with birth date. You must have legal custody of the children. A Joseph's Coat Membership is required to request assistance.

### Joseph's Coat Membership Guidelines

Observe the limits of Clothing. Respect others. Follow The Golden Rule and the rules of Joseph's Coat. No Children, no exceptions. Keep clothes on the hanger volunteers will remove them at checkout.

**JOSEPH'S COAT RESERVES THE RIGHT TO REFUSE SERVICE TO ANY INDIVIDUAL BASED ON THE NEEDS OF THE ORGANIZATION.** My signature indicates I have read & understand the above and will use Joseph's Coat premises according to these guidelines. I understand I relieve Joseph's Coat of Central Ohio, its volunteers, staff, and all Board members of all liability for any injuries I cause to myself and others on Joseph's Coat Premises.

Primary Adult Signature \_\_\_\_\_

Date \_\_\_\_\_

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

Complete the Application and provide a photo ID for all adult household members. This can be Government ID and must have a current address and birthdate. You must bring identification for all children under 17 or under in your home. **This is a requirement before the first shopping, with no exceptions.** This can be a legal document from the court showing custody being given.

You may mail forms to Joseph’s Coat, 7500 East Main Street, Reynoldsburg, OH 43068. Allow 5 to 10 business days for processing. Reminder: you are required to bring your ID before shopping.

Primary Adult Signature \_\_\_\_\_ Date \_\_\_\_\_