

	
	CLIENT INFORMED CONSENT

Last Name: _____ First Name: _____

As a Petawawa Pantry client, I understand that:

1. I will be treated with the utmost dignity and respect at all times.
2. Free food and other assistance will be provided regardless of race, national or ethnic origin, citizenship, colour, religion, gender, sexual orientation, income source, age or disability.

Food

1. The Petawawa Pantry strives to provide high quality food items.
2. I will receive food free of charge, without being required to give donations, pay, work or participate in religious services in order to receive food.
3. I can accept or refuse all or part of our services.
4. I can request foods and personal care items for my specific needs, as available.
5. I am responsible for avoiding any specific foods for my family's dietary needs.

Personal Information

1. Client management software (Link2Feed) will be used to securely store personal information.
2. My privacy will be respected. All personal information will be stored securely and the Petawawa Pantry will maintain the confidentiality of my information.
3. My personal information will not be shared or sold.
4. The information collected is used for statistical purposes to guide Pantry services, programming and grant applications.
5. If I do not wish to disclose my personal information, service will not be denied.
6. I give consent _____ (or don't give consent _____) to the use/storage of my personal data.

Client Initial
Client Initial

Complaints

1. I have a right to complain about my interactions and the services at the Petawawa Pantry.
2. Complaints will be treated confidentially and will be investigated, if required.
3. There will be no retaliation against a client for raising a complaint.

My signature below indicates I understand with the items above.

Signature
Date