



“...for I was hungry and you gave me food, I was thirsty and you gave me drink, I was a stranger and you welcomed me...” ~ Matthew 25:35

# Wildwood Soup Kitchen

203 Barwick Street, Wildwood, FL

## Wildwood Soup Kitchen: Delivery Policy

March 2007

- 1) When a driver or an applicant notifies the Soup Kitchen that someone needs to be placed on the home delivery list, the person’s name and phone number should be given to a member of the Drivers Committee (Don Lozier, Ken Macomber, Ed Perry or Sue Terhune).
- 2) A Drivers Committee member will call the interested applicant to obtain the information on the form below. It is important to know how long the applicant expects to need deliveries. We do not want people assuming this is a lifelong commitment (unless they will actually need deliveries for the rest of their lives). When the applicant no longer requires our services, deliveries will stop.
- 3) Please obtain directions to the applicant’s home, so they are placed on the correct delivery route.
- 4) The form below will be signed and dated by one of the members of the Drivers Committee.
- 5) Forms are kept in the portable file on the back shelf of the rear storage room at the Soup Kitchen.
- 6) There will be a verbal follow-up every 3 months by a member of the Drivers Committee, of those applicants who indicate at the outset that they are temporary recipients.
- 7) It is the responsibility of each driver to notify the appropriate kitchen staff when a delivery guest is away, in the hospital, or has indicated some pertinent information to the driver. Also, place a note on the clipboard with this same information in order to inform other drivers of that route.
- 8) Finally, the driver should contact the police if a delivery guest has meals piling up on the porch or if the driver knows the delivery guest is in trouble and unable to answer the door.

Name _____ Telephone # _____
Spouse’s Name (if applicable) _____
Address _____
Emergency Contact _____ Telephone # _____
Address _____
<b>PLEASE EXPLAIN YOUR NEED:</b>
How long do you anticipate needing this service? _____
Additional Info: _____ _____
<b>Office Information Only</b>
Date Started _____ Number of meals _____
Interviewed by _____ Date _____