Application for the Bayfield County WIC Program

Office Use Only: Date Received: _____

Answer the following questions to the best of your knowledge.
All information will be kept confidential.

Please Print

Your Name_____
First Middle Last

Address _____
Street or rural route

_____
City Zip County

Phone _____ Your date of birth ____/____/____
(During the day)

Number of people in your family _____
(Counting you)

(Please circle)
Household income $_____per week 2 weeks month year
(before taxes)

Are you pregnant? Yes No if yes, Due Date: ____/____/____

Have you had a baby in the last 6 months? Yes No

Are you breastfeeding a baby under one year of age? Yes No

Names and birthdates of your children under age 5.

Name	Sex	Birthdate
_____	M/F	_____/_____/_____
_____	M/F	_____/_____/_____
_____	M/F	_____/_____/_____
_____	M/F	_____/_____/_____

Mail your completed application to:
Bayfield County WIC Program
101 Main Street West
Suite 103
Ashland, WI 54806

If you do not hear from us within 12 days of mailing your application please call 682-6661.

In accordance with Federal law and U.S. department of Agriculture policy, this institution is prohibited from discrimination on the basis of race, color, national origin, sex, age, or disability. To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, Room 326-W, Whitten Building, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410- or call (202) 720-5964 (voice and TDD). USDA is an equal opportunity provider and employer.