

2019 Brown County Food Waste & Organics Drop-Off Program Sign Up Form



Name(s):					Date:		
					/	/	
Home address:				Apt. Number:			
City, State, Zip:			Number of people living in				
			your h	ouse	hold:		
What City/Village/Town do you live in?							
Email address*:							
Alternate email address:							
Daytime phone number:	Evening phone number:						
()		()					
Do you currently compost at home(please check all that			Will you continue to compost				
apply)?			at home after signing up?				
☐ Yes – backyard ☐ Yes – worm ☐ No – do not compost ☐			☐ Yes	5	□ No	1	
*Please include an email address for communication about this program.							
Office Use Only							
Registration date:	Staff Initials:		Received	Received:			

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Please fill in the following demographic information which will be kept confidential:

Number of people living in your	Zip code:				
Adults (18 years and ove					
Household Income:			Do you own or rent your		
☐ Under \$25,000	☐ \$25,000-\$49,999	☐ \$50,000-\$74,999	current dwelling?		
☐ \$75,000-\$99,999	☐ \$100,000-\$124,999	☐ Over \$125,000	☐ Own ☐ Rent		
☐ Prefer not to respond					
Please identify your household's race or ethnicity (check all that apply):					
☐ American Indian or Alaska Na	ative \square Hawaiian or	Other pacific Islander	Asian or Asian American		
\square Black or African American	\Box Hispanic or L	atino	☐ Non-Hispanic White		
☐ Prefer not to respond					

Please return this form to: Brown County Resource Recovery Department, 2561 S. Broadway, Green Bay, WI 54304 (or) Please email this form to: bc_resource_recovery@co.brown.wi.us