

FOOD DRIVE REGISTRATION FORM

	Today's date: Food drive start date: Food drive end date:
Name of Organization Hosting Drive:	
Гуре of Organization (check one): School Company Place of Worship	Civic Association Other:
Address where food will be collected:	
City, State: County:	Zip:
Contact person:	
Contact phone: (office)	(mobile)
Contact email:	
Hours for delivery: Special delivery	very instructions:
Nill you be using our collection bins? Yes No If yes, number of bins needed:	
Nill you be dropping off food or requesting a pickup? Displease note: due to our limited resources, it may take up to 2 week season. If you are able, we would appreciate if you would drop off the	s after your drive is over to pick up the food, particularly during the holiday
Nould you like us to email you support materials: step-by-ste	ep instruction guide, 8 ½ x 14" poster, most needed items list?
Yes No	
PLEASE RETURN COMPLETED FORM TO:	

Kristin DeJesus • 856.662.4884 ext. 131 • kdejesus@foodbanksj.org

