



# Food & Fund Drive Participation Form

## Contact Information

Organization Name: \_\_\_\_\_

Coordinator Contact Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone/Email: \_\_\_\_\_ / \_\_\_\_\_

## Food & Fund Drive Information

Food & Fund Drive Date(s) \_\_\_\_\_

Is this drive open to the public? **Yes**\_\_\_\_ **No**\_\_\_\_

(We're happy to help promote your drive if it is a public event)

### Raise Funds

My org will raise funds by: **Virtual Food Drive**\_\_\_\_ **Cash/Check Donations**\_\_\_\_

My org will borrow cash jars: **Yes**\_\_\_\_ **No**\_\_\_\_ **If yes, how many?** \_\_\_\_\_

### Collect Food

My org will borrow food collection barrels: **Yes**\_\_\_\_ **No**\_\_\_\_ **If yes, how many?** \_\_\_\_\_

### Logistics

My org will pick up barrels/cash jars at Second Harvest: **Yes**\_\_\_\_ **No**\_\_\_\_

**If yes, date you will be picking up:**\_\_\_\_\_

My org will deliver donations to Second Harvest: **Yes**\_\_\_\_ **No**\_\_\_\_

**If yes, date you will be delivering:**\_\_\_\_\_

My org needs Second Harvest to deliver barrels/cash jars: **Yes**\_\_\_\_ **No**\_\_\_\_

**If yes, REQUESTED date:**\_\_\_\_\_

My org needs Second Harvest to pick up donations: **Yes**\_\_\_\_ **No**\_\_\_\_

**If yes, REQUESTED date:**\_\_\_\_\_

**Any special delivery/pick-up instructions** \_\_\_\_\_

For more information or questions, contact Heather by phone at 216-7230.

Please return this completed form to [FFD@shfbMadison.org](mailto:FFD@shfbMadison.org).

THANK YOU FOR SUPPORTING SECOND HARVEST FOODBANK!