

KENAI PENINSULA
FoodBank
Food Drive Participation Form

Organization Information

Name of Event: _____

Name of Hosting Organization: _____

Physical Address: _____

Mailing Address: _____

Contact Person: _____ Title: _____

Phone Number: _____ Email: _____

Event Information

Dates: From _____ To _____ Times: _____

Barrels

Will you use your own barrel(s)? Yes ___ No ___ If no, how many barrels do you need?

Will you be picking up the barrel(s)? Yes ___ No ___ If no, when would you like the barrel(s) delivered? Please indicate the date and time preferred for delivery: _____

Pickup/Return

Will you be delivering the food to the food bank following the drive? Yes ___ No ___

If no, when would you like the food and barrels to be picked up? Please indicate the date and time preferred for delivery: _____

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Will you need tent signs? Yes ___ No ___ If yes, how many? _____

What would you like on the signs? _____

Will you be sending a Public Service Announcement? Yes ___ No ___ If no, would you like us to do so? Yes ___ No ___

If yes, list any special instructions, information, or requests you would like to include:

Would you like a tour of the facility? Yes ___ No ___ If yes, please indicate the date and time preferred: _____

Note: Due to limited staff, KPFB reserves the right to change pickup/delivery dates and times. Ongoing food drives need to fill out new forms at the beginning of the fiscal year (January 1st).