

# Food Drive Registration Form

Thank you for coordinating a food drive to benefit the Regional Food Bank.  
Please complete the following form and return it to the Food Bank  
before you begin your food drive so we can add you to our Food Drive Calendar.  
Thank you!

Contact Person: \_\_\_\_\_

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

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

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

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Date(s) of Food Drive: \_\_\_\_\_

Location(s) of Drive: \_\_\_\_\_

I will drop off food at the Food Bank after the food drive

I'd like the Food Bank to pick up the food after the food drive (available only for collections of 500 pounds or more)

Pick-up date: \_\_\_\_\_

Pick- up directions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please note: If the amount of food you collect fits in a car or SUV, please make every attempt to deliver the food to the Food Bank yourself. This allows the Food Bank to use its vehicles for larger food pick-ups. Please call with any questions: 518-786-3691. Thanks!

**Regional Food Bank of Northeastern New York**  
Attn. Bob Baker  
965 Albany Shaker Road  
Latham, NY 12110  
518-786-3691, x296 phone  
518-786-3004 fax  
bobb@regionalfoodbank.net

<b>FOR OFFICE USE ONLY</b>	
Donation Date:	_____
Weight:	_____ lbs. / \$ _____
Date to Joel and Linda:	_____