

Food Drive Registration Form

Thank you for coordinating a food drive to benefit the Food Bank of the Hudson Valley.
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: _____

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 make arrangements for pick up after the food drive.

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: 845-534-5344. Thanks!

Food Bank of the Hudson Valley
Attn: Ron VanWarmer
195 Hudson Street
Cornwall on Hudson, NY 12520
845-534-5344, x103 phone
845-534-5256 fax
rvanwarmer@foodbankofhudsonvalley.org

FOR OFFICE USE ONLY	
Donation Date:	_____
Weight:	_____ / \$ _____
Donna:	_____ RE/TY: _____