



24th Annual NALC Food Drive

Saturday, May 14, 2016

OFFICIAL REGISTRATION AND POST CARD REQUEST FORM

(Please print clearly. Return by mail only—no faxes—by **March 1, 2016.**)



Branch Information

Branch #: _____

Branch President Name: _____

Branch address: Street _____

City _____ State _____ Zip _____

Branch Office Phone: _____ Home/Cell Phone: _____

Email: _____

Food Drive Coordinator Information

Coordinator Name: _____

Address: Street _____

City _____ State _____ Zip _____

Office Phone: _____ Home/Cell phone no.: _____

E-mail address: _____

Material Resource Information

Post Cards: # of residential deliveries served by your branch: _____

Mailing address for postcards to be delivered to:

Attn: _____

Bags: Do you have a local sponsor for bags? Yes / No *(please circle one)*

Who is the sponsor? _____

Number of bags to be distributed: _____

Partnership Opportunities Materials:

Do you need Partnership Opportunities Materials? Yes / No *(please circle one)*

(will be sent to Branch Food Drive Coordinator)

Branch President: _____

signature *date*

Return ASAP to: NALC Food Drive Registration, 100 Indiana Ave. NW, Washington, DC 20001