

Letter Carrier Stamp Out Hunger ® Food Drive REGISTRATION FORM



(Stations without City Letter Carriers)

Return form by mail only to: NALC Food Drive Registration, 100 Indiana Ave. NW, Washington, DC 20001

Station	Informatio	n		
Zip Code:				
Post Office:	Street			
City		State	e Zip	
Office Phone):	Home/Cell	Phone:	
Email:				
Food Dr	_	nator Informa		
Food Drive Point Person Name:				
Address:				
Address.				Zip
Office Phone	-			•
Office Phone: Home/Cell Phone: E-mail address:				
L-man addre				
Material Resource Information				
Post Cards: # of residential deliveries served by your Branch:				
Physical Mailing address (No PO Boxes) 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 Food Drive Point Person)				
Food Drive	e Point Persor	າ:		
		(signature)		(date)