

## Feed the Need Food Drive Commitment Form

Contact Date: \_\_\_\_\_ FTN Date: \_\_\_\_\_

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

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact Email: \_\_\_\_\_

Store Name & Location: \_\_\_\_\_

Store Name & Location: \_\_\_\_\_

Store Name & Location: \_\_\_\_\_

Store Name & Location: \_\_\_\_\_

Hours of Drive: \_\_\_\_\_

Sorting Food: \_\_\_\_\_ No \_\_\_\_\_ Yes If yes, date: \_\_\_\_\_

# of Flyers Needed: \_\_\_\_\_ Provided on(date): \_\_\_\_\_

Signs Provided: \_\_\_\_\_ No \_\_\_\_\_ Yes If yes, how many \_\_\_\_\_

Food Drive Sign(s) are the property of Integrated Family Community Services (IFCS) and it is the responsibility of the partner organization to return the Sign(s) to IFCS, 3370 S. Irving St., Englewood, CO 80110.

*PLEASE NOTE that the group should STOP distributing flyers 30 minutes prior to the end of the arranged food drive time.* This will ensure that there is a representative from your group available to collect the donated items when shoppers are exiting the store.

\_\_\_\_\_  
Representative Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Date

If you have any questions regarding Integrated Family Community Services Feed the Need Food Drive Program, please call 303-789-0501 or email [kendrab@ifcs.org](mailto:kendrab@ifcs.org)