

Meal Packaging Event Information

www.riseagainsthunger.org

| Contact Information for Event Organizer | | | | | |
|---|------------|--|-------------------------|----------|--|
| Event Organizer Name | | | | | |
| Street Address | | | | | |
| City, State, ZIP Code | | | | | |
| Work Phone | | Home Phone | Home Phone | | |
| Mobile Phone | | E-Mail Address | | | |
| Perferred Contact Method | Work Phone | ☐ Home Phone | ☐ Mobile Phone | ☐ E-mail | |
| Event Information | | | | | |
| Organization Name | | | | | |
| Organization Phone | | Organization Fax N | Organization Fax Number | | |
| Organization Website | | | | | |
| Event Street Address | | | | | |
| Event City, State, ZIP Code | | | | | |
| Event Date | | Event Start Time | | | |
| Number of Volunteers | | Target Number of Meals (minimum 10,000) | | | |
| Location of Event | | | | | |
| Event Area Accessibility (elevato access, truck height restriction, e | | | | | |
| Other Information Please enter any additional information relevant to the packaging event | | | | | |
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