2024 Food Shelf Registration Form

Food Shelf Name*



Note: March Campaign allocation check will be made out to this name and this is how the food shelf will be named in any March Campaign communications.			
Contact Name*			
Contact Email Address*			
Contact Phone Number*			
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Food Shelf MAILING Address* Note: 2022 allocation check will be mailed to this address, unless otherwise noted.			
Street address OR PO Box			
Food Shelf MAILING Address* Note: 2022 allocation check will be mailed to this address, unless otherwise noted. Street address OR PO Box City, state and zip code			

Food S	shelf PHYSICAL LOCATION Address (if different)	
Street a	address		
City, sta	ate and zip code		
_			
Pa	rticipation Agreement* By checking this box, I agree to a Food Shelf Participation Agreem	•	e March Campaign as stated in the 202
mı	ust be a nonprofit corporation or be a file with Minnesota FoodShare	affiliated with a nonprof	on Agreement, a participating food she fit corporation and have documentatio
	Previously submitted documentWill submit documentation to M	·	
		_	ease contact myoung@gmcc.org)
Food F	Bank(s)* Food shelf is a member of the fo	ollowing food hank(s)	
10001	Same is a member of the re	nowing rood barik(s).	
2023 F	ood Shelf Use Statistics – Pounds* A	portion of your food shelf	's 2024 allocation check is based on this da
	ounds of food distributed in 2023		
2023 F on this		olicated* A portion of you	ur food shelf's 2024 allocation check is base
Total p	eople served in 2023, duplicated		
Subm	it this form and necessary docum	entation, if applicable	e, via:
MAIL:	GMCC Minnesota FoodShare	EMAIL:	Scan and submit electronically to
	Attn: March Campaign		myoung@gmcc.org and
	1100 East Lake Street		jstrautman@gmcc.org

*required

Minneapolis, MN 55407

If you need assistance completing and/or submitting this form, please call 612-276-1556.