



602 Bond Street
Bozeman, MT 59715
586-7600 fax: 585-5597
e-mail: info@gallatinvalleyfoodbank.org

Group Registration Form

Group Name: _____

Group Type: Church Service School Agency Business Other _____

Primary Contact Person: Name: _____ Phone: _____

Address: _____ Email: _____

Group Members:

What does your group hope to learn/gain from this volunteer experience?

Leader/Coordinator Signature: _____ **Date:** _____

If you are doing a food drive for us, what are the dates? _____

Are you delivering the food to us? _____ **or do you need to us to pick the food up?** _____

Please include dates of requested pick up or delivery _____

The Gallatin Valley Food Bank is sponsored by the HRDC and the Greater Gallatin United Way.

