

# Feed The Hungry Project Community Day

## Non-Profit Agency Registration Form

**Event Date:** June 6, 2026

**Location:** 834 Yankee Road, Middletown, OH 45044

### Agency | Organization Information

**Organization Name:**

**Contact Person Name:**

**Title/Role:**

**Phone Number:**

**Email Address:**

**Organization Address:**

### Agency Details

**Type of Services Provided (check all that apply):**

- Food Assistance
- Clothing
- Health Services
- Education
- Housing Support
- Job/Employment Services
- Youth Programs
- Other: \_\_\_\_\_

**Brief Description of Your Organization/Services:**

### Event Participation

**Will you provide resources or materials to attendees?**

Yes  No

If yes, please describe:

**Will you need a table and chairs?**

Yes  No

**Number of representatives attending:** \_\_\_\_\_

**Do you require electricity?**

Yes  No

**Do you plan to distribute food or beverages?**

Yes  No

## **Setup Information**

**Arrival/Setup Time:** 9:30 a.m. – 11:30 a.m.

**Special Requests or Accommodations:**

## **Agreement & Signature**

By clicking below, I acknowledge that I am registering my organization to participate in the Feed The Hungry Project Community Day.

**Name:**

**Signature:**

**Date:**