

Hunger 101

A Program of Community Food Bank

Registration Form

Instructions: Fill out form completely and please print neatly.

Today's Date _____

Name of Contact Person: _____

Name of Organization: _____

Address: _____

Number

Street

Apt Number

City

State

Zip Code

Email: _____

Phone Number: _____

Date(s) Requested: _____

You can contact us to confirm availability of desired date(s)

How many participants do you expect? _____

Registration fee for this 90 minute seminar is **\$25.00 per class**.

Please return completed registration form along with check or money order to:

Community Food Bank
210 N. Thorne Ave
Fresno, CA 93706

Please contact Dayatra Latin at 237-3663 or programs@communityfoodbank.net for more information.

