



Brown Bag It! Sponsor Registration



General Company Information:			
Company Name			
Street Address	City, State		Zip Code
Phone Number	Fax Number		Website
Line of Business	Chief Executive Officer Name		Number of Employees
Campaign Information:			
Name of Campaign Champion			Campaign Champion Title
Dates of Your Campaign	# of Employees Participating	# of Brown Bags Needed	Your Campaign Goal \$
Would you like for a Food Bank representative to speak to your employees regarding the campaign?			Yes No
If yes, please specify the date/time that you are requesting a presentation:			

FOR OFFICE USE ONLY	
Received:	___/___/___
Data Entry:	___/___/___