**2021 Washington Food Coalition Membership Renewal Form**

*Important note: Our dues utilize a sliding scale model based on each agency’s Annual Operating Budget and it is assumed you do not need to include in-kind food donations for this amount.*

☐ **For individual agencies:** Our agency will join the coalition at the following rate based on Annual Operating Budget (AOB):

Dues cost sliding scale (check box for appropriate dues level):

**□ $25**: AOB of $50,000 or less

**□ $50**: AOB of $51,000-500,000

**□ $100**: AOB of $501,000-1 Million

**□ $250**: AOB of $1 Million +

**Total Amount of Our Support to Washington Food Coalition: $**

Organization: \_\_\_ Contact Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you the primary contact for your organization? Yes\_\_\_ / No \_\_\_\* Add additional names on reverse side.

Agency **Mailing** Address: \_\_\_\_\_\_ \_\_\_

Site Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: ( ) \_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_

Payment Method: **☐ Cash ☐ Check #**\_\_\_\_\_\_\_\_\_  **☐ Credit Card #:** \_\_ \_\_\_\_

Expiration Date: \_ / CVS code: \_\_\_\_\_\_\_\_ Billing Zip Code:

**Food Assistance Programs that your program participates in:**

* **EFAP**
* **TEFAP**
* **CFSP**

**Hunger Relief services your program provides:**

* Food Bank/Pantry
* Distribution Center (any size)
* Meal Program
* Backpack Program
* Mobile Food Bank Program
* Home Delivery Program
* Summer Meal Program
* Farm/Garden
* College/Univ. Pantry
* Other non-food safety-net assistance

**Your membership comes with benefits!**

* Discounted fee to our annual conference and other trainings and events
* A discounted copy of valuable resources manuals– *Food Safety, Special Dietary Needs, Food Banking 101, and Best Practices.*
* Monthly E-newsletters and printed/mailed newsletters 2-3 times/year newsletters
* Training opportunities for staff & volunteers plus on-call help and assistance answering your questions about programs and services, models and best practices, and more.
* Food Bank Certification course for your staff/volunteers
* Access to a discounted membership with WA Nonprofits, for even more fabulous trainings that are offered both online and in person, all across the state
* Access to over 300 other WFC members – your colleagues in the fight against hunger!
* Discounted agency insurance through great American Insurance/Conover.
* Your agency has a vote in the election of your district representatives.

**Return from to Trish at :** [**Trish@wafoodcoalition.org**](mailto:Trish@wafoodcoalition.org)**, or by mail to PO Box 95752, Seattle, WA 98145**

(Please see reverse side)

Please share with us any names and contact information for any additional staff members for your organization that should be receiving emails and information from the Washington Food Coalition directly.

Name Title Email

Name Title Email

Name Title Email

Name Title Email