Application for Dehydrated Soup Mix and/or Fruit

to the

NORTH OKANAGAN VALLEY GLEANERS SOCIETY

Mailing Address: PO Box 28038 Lavington Main PO, Vernon, BC V1B 3L9
Telephone (250)558-5872 Website: www.novgleaners.org E-Mail: novgleaners@gmail.com

1) NAME OF ORGANIZATION:	
2) ADDRESS:	
PHONE: E-MAIL/WEB	POSTAL CODE:
3) CONTACT PERSON	
4) CANADIAN CHARITY REGISTRATION NUMBER	
5) WHAT IS YOUR REQUEST? (e.g. Qty of bags of Sou makes 100 cups of soup, when cooked in 25 litres of wa	p Mix or Fruit Snack - 12/box or 65/barrel. Each bag ter.)
6) WHAT IS THE PLANNED DESTINATION ?	
7) WHEN DO YOU PLAN TO SHIP?	
8) DO YOU HAVE REQUIRED FUNDS IN PLACE TO Control of the Note: All arrangements and costs associated with pickup	
9) IS A PHYTO-SANITARY CERTIFICATE REQUIRED? This certificate (or similar) will be the responsibility of the	
10) WHO IS DISTRIBUTING THE CARGO AND HOW V	/ILL IT BE DISTRIBUTED?
11) NAME THE MAIN CATEGORIES OF PEOPLE WHO disabled)	, , ,
12) HOW WILL YOU GIVE FEEDBACK TO THE GLEAN that could be made; personal stories; testimonials; photo	
13) WOULD YOU LIKE TO BOOK A TOUR OF THE GLE DAY, SO YOUR SUPPORTERS CAN EXPERIENCE OU	
The applicant agrees that this product is a donation desi sale, or for exchange for profit or gain, and is of no commonth Okanagan Valley Gleaners in accepting and distribution Valley Gleaners with tracking documentation including contents.	nercial value. The Applicant becomes an Agent of outing this product, and shall provide North Okanagan
Signed	Date
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For Gleaners Use: Approved by North Okanagan Valley Gleaners	Date