Sitka Food Co-op Donation Request Form

“Bringing Good Food & Community Together”

Sitka Food Co-op is proud to work with others in our community to enhance quality of life for our friends and neighbors. Please review our Donation Policy before submitting your request.

Organization Name: _________________________________________________________

Contact Name: _______________________________________  Date: ________________

Phone: ________________________  Email: _____________________________________

Type of Organization:
☐ Agricultural  ☐ Educational
☐ Environmental  ☐ Community
☐ Health-oriented  ☐ Other: __________________________________________________

Have you received a donation from Sitka Food Co-op within the past twelve months?  Y / N

Type of donation you are requesting:
☐ Gift Certificate  ☐ Co-op Cares (Register Round-up)
☐ Gift Basket/Bag  ☐ Sponsorship (amount/type requested): ___________________________

How will Sitka Food Co-op’s participation be recognized? ________________________________
__________________________________________________________________________

If your request is being made for an event, please provide the following information:

Event Name/Date: ___________________________________________________________

Description of Event: _________________________________________________________

Estimated Attendance: _______________________________________________________

Along with your request please submit:

• A summary statement of your organization’s goals, how they align with our mission, and how the donation will be used to meet them.
• Any additional materials (flyers, posters, brochures) that represent your organization or event.
• Proof of non-profit status (if applicable).

Please submit your request by mail or email to:

Keith Nyitray,
General Manager
PO Box 6407,
Sitka AK 99835
sitkafoodcoop@gmail.com