

TEMPORARY FOOD BOOTH APPLICATION

POINT OF CONTACT INFORMATION

Point of Contact Name:

Phone Number:

Date of Application:

Date Event:

Email Address:

Name of Organization/Unit:

EVENT INFORMATION

Type of Event (bake sale, hotdog sale):

Location of Event:

Operating Times:

Point of Contact the day of the event Name/Phone:

EQUIPMENT

Please Circle YES or NO

Sink: YES OR NO

Coolers: YES OR NO

Single-Use Items: YES OR NO

Thermometers: YES OR NO

GLOVES: YES OR NO

Refrigerator: YES OR NO

Mobile Hand Washing: YES OR NO

Hair Net: YES OR NO

Multiple Use Utensils: YES OR NO

VOLUNTEER CERIFICATION

Name of Volunteer:

Type of Certification:

Name of Volunteer:

Type of Certification:

Name of Volunteer:

Type of Certification:

Name of Volunteer:

Type of Certification:

Name of Volunteer:

Type of Certification:

Name of Volunteer:

Type of Certification:

Name of Volunteer:

Type of Certification:

FOOD AND PREPARATION

Food Items:

Cooking Procedure:

Off-Site Preparation? YES OR NO

Food Items:

Cooking Procedure:

Off-Site Preparation? YES OR NO

Food Items:

Cooking Procedure:

Off-Site Preparation? YES OR NO

Food Items:

Cooking Procedure:

Off-Site Preparation? YES OR NO

OTHER INFORMATION

I _____ verify the information provided on this form is accurate. A fund-raiser request has been submitted to the DFWMR, Fund-raiser Coordinator for approval of this event.

Signature of applicant

Date