



Registration Form for U of A Community Organization Functions

Name of Event: _____

Dates and Times of Event: _____

Location of Event: _____

Name of Organization / Association / Faculty: _____

Person directly responsible for the Temporary Food Facility:

Name: _____ E-mail: _____

Mailing Address: _____

Telephone Number: _____ Fax Number: _____

Foods to be served:

Are all foods served either provided by volunteer caterers or from approved food facilities? Yes / No

* Volunteer Caterers are those food handlers who provide food for community organization functions and receive nominal or no compensation for doing so.

What form of protection will be provided for potentially hazardous (hot and cold) foods?

1. In transit? _____

2. At event site? _____

What handwashing facilities will be provided? _____

FOR OFFICE USE ONLY

Date Received: _____ Reviewed by: _____

Comments: _____
