

Sign-up Form

Name of
Organization: _____
School, Restaurant, Bar or Business

Contact Person: _____ Tel: _____(w)
_____(h)
_____(c)
Fax: _____
Email: _____

Address: _____

Drop-Off Depot or Pick-Up Point:

Pick-up
Agreement: _____

Funds raised from cans collected goes towards :
 Cans for Kids
 A specific youth organization:

Signed: _____
Date: _____

Thank you!