

2024 UNIVERSITY & K-12 SCHOOL FOODSERVICE MEMBERSHIP APPLICATION

School Information

University/School District/School Foodservice Authority _____
Address _____
City _____ State _____ Postal Code _____
Website _____

School Foodservice Program Information

Total Student Enrollment _____
Average Daily Participation _____ (# of students served/day for all meal/snack programs)
Annual Produce Purchases _____ (approximate \$ amount for all meal/snack programs)

Does your school participate in any of the following programs? You can select more than one.

- CACFP
- USDA-DoD Fresh Program ("DoD Fresh")
- Fresh Fruit and Vegetable Program (FFVP)
- Salad Bars
- School Gardens
- Farm to School Activities
- Other, please elaborate _____

Primary Staff Contact

We request the School Foodservice Director to be primary contact person for your school's membership with the International Fresh Produce Association (IFPA).

First Name _____ Last Name _____
Title _____
Telephone (Include Country / Area Code) _____ Email _____
Address _____
City _____ State _____ Postal Code _____

Additional Staff Contacts

Your IFPA membership is available to any employee who works for your foodservice operation. To help your school maximize the value of your membership, we recommend you designate a contact for each position area below (if applicable). If you wish to add any additional contacts to your membership roster, please contact Andrew Marshall, amarshall@freshproduce.com.

Dietitian

First Name _____ Last Name _____
Title _____
Telephone (Include Country / Area Code) _____ Email _____

Food Safety

First Name _____ Last Name _____

Title _____

Telephone (Include Country / Area Code) _____ Email _____

Operations

First Name _____ Last Name _____

Title _____

Telephone (Include Country / Area Code) _____ Email _____

Procurement

First Name _____ Last Name _____

Title _____

Telephone (Include Country / Area Code) _____ Email _____

Supply Chain Management

First Name _____ Last Name _____

Title _____

Telephone (Include Country / Area Code) _____ Email _____

Other

First Name _____ Last Name _____

Title _____

Telephone (Include Country / Area Code) _____ Email _____