

Donation Box Host Commitment Form

Company Name:
Starting Date:
Ending Date:
Contact Name:
Contact Email:
Contact Phone Number:
Address:
City/State/Zip:
Location of box in business (ex: lobby, second floor, front desk etc):
Name, email and phone number of person coordinating donations (if different from above):
☐ I commit to hosting a Miami Diaper Bank community donation box at the location referenced above for a one year period.
☐ I commit to collecting new baby diapers and wipes for Miami Diaper Bank.
☐ I commit to contacting and coordinating donations with Miami Diaper Bank.
☐ I agree to have my location and logo displayed on the Miami Diaper Bank website.
Signature Name Date
Thank you for your generous support of our mission and for helping us serve even more underprivileged babies across South Florida.

For information on Miami Diaper Bank please visit: www.miamidiaperbank.com

With Gratitude,

The Miami Diaper Bank Team