DIAPER BANK
OF GREATER CLEVELAND

Diaper Drive Host Agreement & Information Form

Thank you for partnering with the Diaper Bank of Greater Cleveland to help families in our community. Please complete the information below so we can properly support your diaper drive and maintain accurate records for our organization.

Organization / Company Information

Organization / Company Name: _____

Primary Contact Person: _____

Title/Position: _____

Phone Number: _____

Email Address: _____

Organization Address: _____

Diaper Drive Details

Name of Drive (if applicable): _____

Start Date: _____

End Date: _____

Expected Drop-Off / Delivery Date: _____

Estimated Number of Participants: _____

Collection Location(s): _____

Will this drive be open to the public or internal only?

☐ Public

☐ Internal/Employee Only

Items Being Collected

Please check all that apply:

☐ Baby Diapers

☐ Pull-Ups / Training Pants

☐ Adult Diapers

☐ Baby Wipes

☐ Period Products

☐ Personal Hygiene Items

☐ Monetary Donations

☐ Other: _____

Support Requested from the Diaper Bank of Greater Cleveland

Please check any support you may need:

☐ Diaper Drive Toolkit

☐ Most Needed Items List

☐ Flyers or Promotional Materials

☐ Social Media Support

☐ Donation Barrels/Bins (if available)

☐ Other: _____

Additional Partnership Interests

In addition to hosting a diaper drive, please let us know if your organization may be interested in learning more about:

☐ Corporate Sponsorship Opportunities

☐ Employee Volunteer Opportunities

☐ Matching Gift Programs

☐ Financial Contributions or Grants

☐ Event Sponsorships

☐ Hosting Future Drives or Collection Campaigns

☐ Ongoing Community Partnership Opportunities

☐ We would like to schedule a follow-up conversation

Additional Contact Information

How did you hear about the Diaper Bank of Greater Cleveland?

☐ Employee Recommendation

☐ Social Media

☐ Community Event

☐ Current Partner

☐ Media/News Story

☐ Other: _____

Is there another team member we should connect with regarding community partnerships, sponsorships, or giving opportunities?

Name: _____

Title: _____

Email: _____

Phone: _____

Photo & Recognition Permission

The Diaper Bank of Greater Cleveland may share photos, organization names, and drive outcomes through newsletters, social media, annual reports, and other promotional materials.

☐ Yes, we give permission to be recognized publicly.

☐ No, we prefer not to be publicly recognized.

Agreement & Acknowledgement

By signing below, I acknowledge that our organization/company is voluntarily hosting a diaper drive in support of the Diaper Bank of Greater Cleveland. We understand that collected items will support local families experiencing diaper need and basic hygiene insecurity.

We also understand that the Diaper Bank of Greater Cleveland reserves the right to decline opened, damaged, expired, or unsafe items.

Host Representative Signature: _____

Printed Name: _____

Date: _____

Diaper Bank of Greater Cleveland Contact Information

The Diaper Bank of Greater Cleveland
Phone: 216-706-3407
Email: info@diaperbankgc.org
Website: www.diaperbankgc.org

Thank you again for helping us ensure families in our community have access to essential basic needs!