

## Associated Students of Hartnell College Food Sale Petition Form

THIS APPLICATION MUST BE APPROVED BY HARTNELL'S FOOD SERVICE MANAGER PRIOR TO SUBMITTING TO THE STUDENT LIFE OFFICE FOR APPROVAL.

**NOTE:** This form with APPLICATION TO USE FACILITIES, MISCELLANEOUS TECHNICAL CHECK LIST, CONTRACTS (if applicable) must be completed and submitted to the STUDENT LIFE OFFICE at least TWO WEEKS PRIOR TO THE EVENT.

TYPE OF FOOD SALE: \_\_\_\_\_

DATE OF FOOD SALE: \_\_\_\_\_ TODAY'S DATE: \_\_\_\_\_

CLUB/ORGANIZATION SPONSORING FOOD SALE: \_\_\_\_\_

LOCATION OF FOOD SALE: \_\_\_\_\_

Student activities that include food may **only** be catered by the Hartnell College Cafeteria.

Contact person for this activity: \_\_\_\_\_

Day phone number: \_\_\_\_\_ Evening phone number: \_\_\_\_\_

THIS FOOD SALE IS SUBJECT TO THE FOLLOWING REGULATIONS. VIOLATIONS OF ANY OF THESE REGULATIONS CAN BE JUSTIFICATION TO STOP THIS ACTIVITY.

1. All meats for food sales must be approved by Hartnell's Food Service Manager.
2. Solicited donations must be approved by Hartnell's Food Service Manager. Perishable good items may not be solicited for donation from private individuals. Fresh fruit and vegetables can be an exception.
3. All perishable foods must be kept under refrigeration in the cafeteria prior to the sale. If special equipment is needed, i.e. warming trays, ice, etc., arrangements must be made two weeks in advance.
4. Meat items must be prepared under the supervision of the Food Service Manager.
5. Baked goods cannot contain whipping cream or custard. All baked items must be individually wrapped. Whipped cream may be added at the time of sale if kept under proper refrigeration.
6. Food servers must be in good health. Their hands must be washed prior to serving the food; they cannot have any open wounds or sores on their hands.

I HAVE READ, UNDERSTAND, AND AGREE TO ALL FOREGOING CONDITIONS.

\_\_\_\_\_  
Club Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Club Advisor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Food Service Manager

\_\_\_\_\_  
Date

.....  
ASHC Advisor \_\_\_\_\_

.....  
Date \_\_\_\_\_  Approved

Submit to Student Life Office