



Benton/Franklin County

Master Food Preserver

WASHINGTON STATE UNIVERSITY
EXTENSION

2016 Master Food Preserver Registration Form

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

E-mail: _____

Application Category:

New Volunteer

Benton or Franklin County Residents Only

\$75 course fee and commitment to do 50 hours volunteer outreach in 2016

Please complete remaining registration form

Returning Volunteer

\$30 course fee and commitment to do 50 hours volunteer outreach in 2016

Must have completed and reported 50 hours in 2014 and/or 2015

(\$50 course fee if you do not have the new MFP Handbook)

Proceed to last page and sign the Master Food Preserver Agreement

Returning Volunteer Special Project

\$30 course fee and planning meeting with Lizann Powers-Hammond

Non -Volunteer

\$375 course fee (space available basis) No volunteer outreach hours required

Please complete remaining registration form

Reasonable accommodation will be made for persons with disabilities and special needs who contact the Program Coordinator/Instructor, Lizann Powers-Hammond, by April 1, 2016 at 5600-E West Canal Dr. Suite E, Kennewick, WA 99336 or (509) 735-3551 or email to:

powers@wsu.edu

Do you have any special accommodation needed because of a disability? _____

Why do you want to participate in the Master Food Preserver Program?

What sources of food preservation instructions/recipes are you presently using?

What others have you used in the past?

Have you had any out-of-the-ordinary food preservation experiences?

(Please circle one answer) yes no

If yes, please explain:

What kind of experiences have you had working with people (for pay, volunteer, club, church)?

**Washington State University
Master Food Preserver Volunteer Agreement**

As a participant in the WSU Master Food Preserver Volunteer Program, I agree to:

(Please initial each line)

- _____ Attend all training sessions for the Master Food Preserver Program.
Volunteers will be dropped from the program after two absences or excessive tardiness.

- _____ Share only USDA research based food preservation information taught to me by the
Washington State University Extension Faculty.

- _____ Refer questions on which I have not received training, or am unsure of, to the Washington
State University Extension Faculty (Lizann Powers-Hammond).

- _____ Commit to at least 50 hours of volunteer service as a Master Food Preserver in Benton and
Franklin counties during the calendar year.

- _____ Complete course work and final exam with a score of 85 percent or better.

- _____ Avoid endorsement of any brand name product or any store.

- _____ Recognize that WSU Extension programs are available to all without discrimination, and
comply with affirmative action guidelines established by WSU.

- _____ Refer to myself as a Washington State University Master Food Preserver only after I have
completed training, passed the written and oral exams, and only in the year certified. I will
not wear my Master Food Preserver name tag nor refer to myself as a WSU Master Food
Preserver when I am working for another agency or company.

- _____ **I understand that if I do not complete the program, or am dropped from the
program, I will not be refunded the course registration fee. As a volunteer, if I do not
complete the course requirements or document my 50 hours of volunteer outreach, I
agree to pay the \$375 non-volunteer course fee.**

Signature

Date

Printed Name