



New Town Eagles Backpack Food Program 2019

Free Weekend Food for Your Child is Available

The New Town Eagles Backpack Food Program is teaming up with the staff and teachers of The New Town Public Schools to offer a supply of nutritious meals and snacks for children over their weekends and extended breaks, free of charge. Bags are distributed by each school office on the last school day before the weekend or break. **Any child enrolled in a New Town Public School is able to receive these weekly bags of food.**

If you believe your child could benefit from this program, we encourage you to **sign them up by filling the form out below and returning it to the front office.** Only one form is needed for all the children in your family, but include information for each child in the form below. This information is kept confidential between The New Town Eagles Backpack Program and The New Town Public School District.

Once your child is signed up, they will receive bags of food each week until they leave the school or until you no longer wish to participate.

We encourage you to take advantage of this program for your family and your children.

Questions or concerns? Please contact your school's front office.

New Town Eagles Backpack Food Program Consent Form 2019

Please sign my child(ren) up for the New Town Eagles Backpack Food Program . I understand my child(ren) will soon start receiving a bag of food at the end of each week for his/her use over the weekend or school holiday.

PLEASE PRINT CLEARLY.

Today's Date _____

Child's Name/Teacher/Grade _____

Special dietary needs, if any (diabetic/food allergy/kosher) _____

Child's Name/Teacher/Grade _____

Special dietary needs, if any (diabetic/food allergy/kosher) _____

Child's Name/Teacher/Grade _____

Special dietary needs, if any (diabetic/food allergy/kosher) _____

Child's Name/Teacher/Grade _____

Special dietary needs, if any (diabetic/food allergy/kosher) _____

Optional: Please check any box below, according to your interest(s). Understand that by doing so, you waive confidentiality, and the school will share your contact information with The NT Eagles Backpack Program

I may be interested in helping to pack food bags.

I may be interested in serving as a volunteer with The NT Eagles Backpack Food Program

OPTIONAL:

Parent/Guardian Name _____

Telephone Number _____

Parent/Guardian Email Address _____