KEY PENINSULA MIDDLE SCHOOL

Dear Parents,

Peninsula schools have been selected to participate in a program called Food Backpacks 4 Kids Program. This program is sponsored by the Peninsula Communities of Faith, a coalition of churches and other community organizations. We are identifying students to have the opportunity to take home a backpack each weekend filled with easy-to-prepare foods and snacks.

Please let us know if you would be interested in having your family participate in the program by signing the form below and returning it to the school. Participant names will be held in strictest confidence so that other students will not be aware of your family's involvement in Food Backpacks 4 Kids. The backpacks will come home each Friday with each child/youth, and the expectation will be for the child/youth to return it to school on Monday. Thank you in advance for allowing your child the opportunity to participate in the program.

FOOD ALLERGIES

If your child is participating in the program, this form needs to be filled out and signed by parent/guardian before backpacks will be sent home.

Does your child or family have any food allergies? _____YES _____NO

If yes, please list all:_____

_____

Number of family members: _____

Do you have the cooking arrangements to use the meal items(such as mac and cheese, pancakes and tuna helper)?

_____ Yes

_____ No, but I have access to a microwave

_____ No, and I do not have access to a microwave _____

FOOD BACKPACKS 4 KIDS PROGRAM:

Student Participant:

_____

Name Age

_____**Yes,** I would like to participate in this program.

Signature _____Phone:_____

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