



388 Upper Oakwood Avenue, Elmira, New York 14903
P: 607.796.6061 F: 607.796.6028 www.foodbankst.org

Date _____

Dear Parent,

Your child has been invited to participate in a program called the **BackPack Program**.

This program is a partnership between the _____ School District and the Food Bank of the Southern Tier.

The **BackPack Program** will provide a bag of non-perishable food* to your child each week for him or her to eat over the weekend and during school breaks. The program is scheduled to begin in October 2020 and will continue throughout the 2020-2021 school year.

We hope that you will tell us how this program is working out for you. We ask that you complete a brief survey once per year to help us evaluate food choices and determine if this program is helpful to you and your child.

Please feel free to contact us at any time with any thoughts or suggestions that you might have.

To enroll your child in the program, please fill out the enclosed sheet and return it to

_____.

*When the Food Bank of the Southern Tier receives donations from manufacturers and distributors, items may be near or past their "USE BY", "BEST IF USED BY", or "QUALITY ASSURANCE" date. These dates refer to the last date the product is likely to be at peak flavor and quality; it doesn't mean the food is unsafe after that date. In general, these items are still of acceptable quality up to one year from this date. For the purpose of the BackPack Program™, we may use food up to 6 months past this date.





2020-2021 BackPack Program Student Enrollment Form

Name of Child: _____ Age: _____

Teacher: _____ Grade: _____

Yes, please enroll my child in the BackPack Program™

Signature: _____ Date: _____

Please list any food allergies your child has:

No, please do not enroll my child in the BackPack Program™ for the following reason:

Signature: _____ Date: _____

Please let us know any questions or comments:

Please return this form by _____ to _____