



Dear Parent,

Your child has been invited to participate in a new program called the Send Hunger Packing Program. This program is a partnership between _____ and Care and Share Food Bank.

The Send Hunger Packing Program will provide a bag of non-perishable food to your child each Friday afternoon for you and your family to eat over the weekend (approximately 10 lbs. of food including breakfast, lunch and dinner items). The program is scheduled to begin _____ and will continue through the end of the school year. **It does not cost anything to participate.**

Some of the foods that may be included in the bag are:

- Cereal
- Tuna & tuna helper
- Spaghetti & sauce
- Canned fruit & vegetables
- Canned meat
- Rice
- Beans
- Soup

To enroll your child in the program, please fill out the enclosed sheet and return it to your child's teacher. Please call _____ with any questions you have. We look forward to a great year!



PARENTAL PERMISSION SLIP

Name of Child: _____ **Age:** _____

Teacher: _____ **Grade:** _____

Yes! Please Enroll My Child in the Send Hunger Packing Program!

Signature

Date

Number in Household

Adults _____ Teens _____ Children _____ Infants _____

Please List Any Food Allergies in Household:

No, please do not enroll my child in the Send Hunger Packing Program for the following reason:

Signature

Date

Questions or Comments:

Please return this form by _____ to _____.