

GOT LUNCH! Inter-Lakes

2022 APPLICATION

Parent's/Guardian's Name: (Please Print) _____

Physical Address: (Where we will be dropping off your bags of Got Lunch food. Please provide any directions that will make it easier for our drivers to find you!)

Contact Telephone Number: _____

Email Address (if available): _____

Student Name (s): Please list all children who will be participating in this program with their date of birth and gender:

Name _____ Date of Birth _____

Name _____ Date of Birth _____

Name _____ Date of Birth _____

Name _____ Date of Birth _____

Food allergies? If any child listed above has a food allergy, please explain below. If there are no food allergies, write "NONE".

Please advise if there are any **special considerations** we may need to know regarding delivering food to your address between 9:00 am and 11:00 am on Monday mornings. For example: animals? Special drop off instructions? Other information?

Applications are to be dropped off at school or mailed to: PO Box 635, Meredith, NH 03253.

For more information:

Tom Witham: 603-707-2872 or tom.witham5@gmail.com

Signature _____ Date _____

Note: Your signature and submittal of this form is consent for your participation in the ***GOT LUNCH! Inter-Lakes Program.***