

ESTELLINE SCHOOL DISTRICT

BackPACH (People Against Childhood Hunger) Program

The Estelline School District is continuing a BackPACH Program that provides complimentary snacks and meals to students who may need additional food resources over the weekends during the school year. The BackPACH Program will begin September 18. During the school year, students will receive one packed meal every Friday.

Any child in grades Pre-K through grade 12, enrolled in the Estelline School District may participate in the BackPACH Program. There are no eligibility requirements and **PARTICIPATION IS CONFIDENTIAL**.

To register, simply complete the consent form below and turn it in to the school counselor (Morgan Hanenberger). Consent forms will be accepted anytime during the school year and children will be served on a first come-first serve basis.

If you have more than one child in school, you only have to submit one form, listing all your children in the spaces below. **THIS INFORMATION WILL BE KEPT CONFIDENTIAL**. Only the School Counselor will know who participates. Bags will be placed in backpacks or lockers when students are out of the classrooms and hallways.

Once your consent form is received, your child's name will be added to the list of students eligible for the Estelline BackPACH Program. You will receive a letter informing you of your child's enrollment or if your child has been placed on a waiting list. If the Estelline BackPACH program has sufficient funds, he/she will begin to receive a supply of kid-friendly foods once every week.

Please consider letting this program help your family. Questions? Contact Morgan Hanenberger at 605-873-2201.

(Note: This program is not associated with the free/reduced-cost lunch program operated through the Estelline School District)

2017-2018 ESTELLINE BACKPACH PROGRAM CONSENT FORM

Turn in to your student's school counselor

Please register my child(ren) for the Estelline BackPACH Program. I understand that if the Estelline BackPACH Program has sufficient funds, my child(ren) will soon start to receive a supply of food at the end of each week for his/her use over the weekend.

PLEASE PRINT CLEARLY.

Today's Date _____

Child's Name	Grade	Any food allergies? If so, please list

Parent/Guardian Name: _____	
Mailing Address: _____	
Phone Number: _____	Email address: _____
Parent/Guardian Signature: _____	Date: _____