

**This letter is made available to all families of the Ponca Public School District.**

**FOODBANK OF THE HEARTLAND Backpack Program  
with help from Christ the King Church, Ponca Nebraska**

The FOODBANK OF THE HEARTLAND Backpack Program works with school staff to provide a free supply of meals and snacks to students who may need an additional food resource over weekends during the school year. The food is given to the children before they leave school each Friday (or, in case of a holiday, the last day before the break). This service is provided as discreetly as possible, and at no charge. If you believe that your child would benefit from this assistance, please register him/her right away. Any child enrolled in Ponca Public Schools may participate.

You may register your child for the FOODBANK OF THE HEARTLAND Backpack Program anytime during the school year. **Only register once per school year. Complete the consent form below and return it to the school office. If you have more than one child in school, you only have to submit one form.** This information will be kept confidential. Once the school receives your consent form, your child(ren)'s name(s) will be added to the list of students registered for FOODBANK OF THE HEARTLAND. She/he will soon begin to receive a supply of kid-friendly food at the end of each school week. \*THE BAG MUST BE RETURNED BY THE FOLLOWING TUESDAY MORNING. IF NOT, THERE WILL NOT BE A BAG FOR YOUR FAMILY THE NEXT WEEK.

**If you haven't already registered, please consider letting this program help your family. Questions? Contact your child's school: Mr. Lahm – (402) 755-5736; Mr. Hayes – (402) 755-5727; Mrs. Hassler – (402) 755-5739 or Mrs. Anderson – (402) 755-5713.**

*(Note: This program is not associated with the free/reduced-cost lunch program operated through the Ponca Community Schools.)*

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**2021-2022 FOODBANK OF THE HEARTLAND Backpack Program Consent Form**

Please register my child(ren) for the FOODBANK OF THE HEARTLAND Backpack Program. I understand that my child(ren) will soon start to receive a supply of food at the end of each week for her/his use over the weekend or school holiday.

**PLEASE PRINT CLEARLY!**

Today's Date: \_\_\_\_\_

Child's name	Dietary Restrictions/Allergies	Grade	Locker #	Elementary Teacher

**Reminder:** TO RECEIVE FOOD EACH WEEK THE BAG MUST BE RETURNED BY TUESDAY MORNING OF THE FOLLOWING WEEK FOR THE FOOD PANTRY TO PACK IT. IF IT IS NOT RETURNED, YOUR FAMILY WILL NOT RECEIVE A BAG THE NEXT WEEK.

Parent Name (printed): \_\_\_\_\_ Parent Signature: \_\_\_\_\_

Home Address: \_\_\_\_\_ Phone: \_\_\_\_\_