



Dear Parent/Guardian,

Your child has been invited to participate in the HACAP Food Reservoir BackPack Program for the 2024-25 school year. To enroll your child in the program, please complete and return the registration form to your child's school.

This is a partnership between your child's school and the HACAP Food Reservoir. The BackPack Program provides a bag of kid-friendly, non-perishable food for your child for weekends and school breaks. This program is available without cost to you.

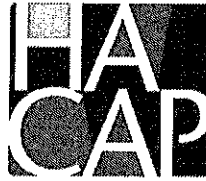
Items may include pop-top canned meals, macaroni and cheese, soy/sun butter, cereal, fruit juice, shelf-stable milk, fruit, and snack items. The food will be placed into a grocery bag and given to your child at the end of the day. The food is not intended to be opened until your child is home.

Parents and guardians concerned with food allergies need to be aware that the BackPack items may include ingredients such as nuts, soy, wheat, eggs and milk. The HACAP Food Reservoir, The BackPack Program, and participating school will not assume liability for adverse reactions to food consumed.

The HACAP Food Reservoir and BackPack Program strive to provide healthy and safe kid friendly food. Each food item is labeled and sealed by the manufacturer. **In the event products are past the marked expiration date, rest assured we are committed to food safety and work with manufacturers to ensure it is still safe to consume.** If you open a package and notice a problem, please contact the BackPack Program immediately.

Please feel free to contact the HACAP Food Reservoir at any time with questions or

concerns: HACAP Food Reservoir
Hiawatha, Iowa 52233
319-393-7811
Email: operationbackpack@hacap.org



Food Reservoir

2024/2025 HACAP BackPack Program Parent Registration Form

Print Parent/Guardian Name: _____

Address: _____ Phone: _____

Participating School: _____ Total # in Household: _____

***Please only fill out for the student(s) who attend the school listed above**

Name:	Grade:	Teacher:	Student Date of Birth:	Ethnicity: (Please Circle)	Race:	RACE
				Hispanic Not Hispanic		C = White B = Black/ African American AS = Asian I = American Indian/Alaskan Native N = Native Hawaiian/Pacific Islander MR = Multi-racial O = Other U = Unknown/ Not Reported
				Hispanic Not Hispanic		
				Hispanic Not Hispanic		
				Hispanic Not Hispanic		

By signing this form, I agree to allow my child/children to participate in the BackPack Program of the HACAP Food Reservoir and participating school. I understand that the BackPack Program is a part of Hawkeye Area Community Action Program.

I understand that the BackPack items may include allergen-containing ingredients. Parents/guardians concerned with food allergies need to be aware of this risk. The HACAP Food Reservoir, Feeding America, BackPack Program, and participating school will not assume any liability for adverse reactions to food provided.

By signing this form I agree to assume any and all risks associated with my child's/children's participation in the BackPack Program including any adverse reaction my child may have to foods consumed.

To promote and expand the BackPack Program, the HACAP Food Reservoir, Feeding America and participating school may wish to use images, photographs, or video of children who are participating in the BackPack Program in materials that may include (but are not limited to) brochures, newsletters, social media and the HACAP Food Reservoir web site.

Please complete:

- I deny permission to use images of my child/children.
- I grant permission to use images of my child/children. I understand that my child's name and personal information will not be used in conjunction with any images or video.

Parent/Guardian Signature _____ Date _____