

Non-Congregate Meal Attestation Parent/Guardian Pick Up

Today's Date: _____

Day you are picking up meals: **M T U W T H F**

Your Name (First & Last): _____

Phone Number: _____ Email (Optional): _____

Number of Children picking up for: _____

Children's Names:

Pickup Location (Please check box)

- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____
- ☐ _____

- ☐ I acknowledge that the meals are intended for children in my household or under my care. I will pick-up meals only for children 18 years or younger. I will not accept more than one lunch and one breakfast per day for any child in my care including any meals being served at other sites under the USDA Child Nutrition Programs.

*For the purposes of non-congregate meal service, the Office of Superintendent of Public Instruction (OSPI) defines a "guardian" as an individual who is primarily responsible for the care of the child on that specific day, such as grandparents or other adults functioning as childcare providers. Individuals meeting OSPI's definition of "guardian" are authorized to collect meals on behalf of children on days when they are providing care. Other persons (i.e. "proxies"), such as adults providing care to unrelated children formally enrolled in childcare, are not considered guardians, and may not pick up meals without the child(ren) present. Childcare providers cannot collect Program meals on behalf of parents or guardians for children attending their childcare.

Signature: _____

Date: _____