

PARENT/GUARDIAN'S FORM FOR DECLINING PARTICIPATION IN THE CHILD AND ADULT CARE FOOD PROGRAM

All child care facilities (day care home providers) participating in the Child and Adult Care Food Program (CACFP) are required to offer meals to children in their care according to State and Federal guidelines.

As a parent or guardian, you have chosen to decline the provider's offered food and will furnish all food for your child. Return the original to your provider.

CHILD'S NAME: _____

PARENT OR GUARDIAN'S REASON FOR DECLINING THE CACFP:

PARENT/GUARDIAN SIGNATURE _____ DATE _____

PROVIDER'S NAME _____

PROVIDER'S SIGNATURE _____ DATE _____

ADDITIONAL COMMENTS:

(Provider: please keep a copy in the child's file and forward the original to FDSN, 2370 Grande Vista Pl, Oakland CA 94601)

In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability.
To file a complain of discrimination, write USDA, Director, Office of Civil Rights, room 326-W, Whitten Building, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call (202) 720-5964 (voice and TDD). USDA is an equal opportunity provider and employer.