

WeekEnd Backpack (WEB)



Providing nutritious weekend meals in a backpack for students facing hunger.

Dear Unified School District of Antigo Families,

For many reasons, it can sometimes be difficult to feed our children. The WEB program goal is to provide students with nutritious, easy to prepare food for the weekends during the school year. This effort is a partnership of the Lan glade Health Coalition, the Unified School District of Antigo, Lan glade County Health Department, and the Antigo Community Food Pantry.

Eligibility:

Any Unified School District of Antigo enrolled students and their family are eligible for a “backpack”. Please complete this enrollment form and return to the **school office** or classroom teacher by **September 27th, 2024** in order to start the first week of October.

NEW in 2024/2025: “Backpacks” will not be distributed at the Antigo High School, instead the students will have access to a pantry where they can pick up food items they may need. Students enrolled at AHS do not need to be listed on this form.

A family may enroll anytime throughout the school year, and will be added to the next distribution after enrollment.

Protocol for Receiving Backpack:

- Each student will receive their own backpack at the end of the school week.
 - Please respect the rule of “no eating on the bus,” and wait to open the backpack at home.
- Program will start the week of **October 11th, 2024** and end the week of **May 16th, 2025.**
- “Backpacks” will be filled with easy to prepare, balanced food choice.



Enrollment:

Household Name: _____ Household Address: _____

Parent/Guardian Name(s): _____ Phone number: _____

E-mail Address: _____

Child's Name	Grade	School

IMPORTANT ALLERGY INFORMATION

Please review the food products contained in the backpack. Carefully read the ingredient and allergen information for each item. It is the responsibility of the parents and guardians to monitor the food being eaten by their children and to read the ingredient and allergen information listed on the food packaging. Please note that the information on the package is only for the food contained in that package. Ingredients may vary from one package to another due to product reformulation or where the product is produced. If you have any concerns regarding the food products provided in the backpack, please discard the food and do not allow your child to eat the food.

** We follow USDA guidelines for food donated after date passes.

May we contact you for feedback regarding the WEB program? Yes ___ No ___ If, yes please circle: Phone or E-mail.

Waiver:

By signing this waiver, I _____ waive and release **WeekEnd Backpacks (WEB)** from any liability, loss, claims, expenses resulting from consumption of food(s) packed within the backpack. These liabilities will include but are not limited to any health hazards resulting from improper or inappropriate handling and storage of food items.

I acknowledge that this waiver and release is being signed by me voluntarily, without coercion, duress, or undue influence and with full knowledge of its terms and effects. I have read the above waiver and release of liability and fully understand its contents.

Name (print) _____ Signature _____ Date _____

