

## YMCA OF CENTRE COUNTY 2025 SUMMER LUNCH PROGRAM

As school is winding down, it won't be long until kids will be out for the summer. This year, we will be conducting bulk meal distributions; daily congregate meals will NOT be provided. You will need to pre-register your child(ren) by completing the attached application and returning it to the main office at your child's school as soon as possible. You may also complete and scan to [mcurtis@ymcaocc.org](mailto:mcurtis@ymcaocc.org)

Food will be distributed on Sunday each week. Your child will receive breakfast and lunch for the week. You will be responsible for preparing the meals your child receives as per the menu enclosed. Cooking instructions will be provided. These meals are for school-aged children under 18 years of age only.

Pickup locations and times are listed below. You will select your preferred pickup location when completing the application. You are only permitted to pick up at the location you select. You cannot visit any other location that serves meals through the SFSP program, which is funded through the PA Department of Education. This includes those being run by another organization.

Parents or Legal Guardians are the only people that are allowed to pick food up. Neighbors, friends, or other family members are not allowed to get food for your children. Locations and times for distributions are as follows:

<u>Distribution Site</u>	<u>Start Date</u>	<u>Pick Up Time</u>
West Branch Area School District	June 8	5:30 – 6:30 PM
Philipsburg Elementary	June 8	1:00 -2:00 PM
Osceola Mills Elementary	June 8	2:30 - 3:30 PM
Moshannon Valley Area High School	June 8	4:00 – 5:00 PM
Wingate Elementary	June 8	2:30-3:30 PM
Mountaintop Elementary	June 8	1:00 - 2:00 PM
Marion Walker Elementary	June 8	4:00 – 4:45 PM

You will receive a calendar of all dates for future distributions at the site you have chosen.

YMCA SUMMER LUNCH APPLICATION: 2024

PARENT'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

PHONE NUMBER FOR EMERGENCY PURPOSES: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

SCHOOL NAME YOUR CHILD(REN) ATTEND:

\_\_\_\_\_

CHILDREN'S NAME AND GRADE:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

Site you will pick food up at: \_\_\_\_\_

I/We, as Parent(s) or Legal Guardian(s) of the above children, acknowledge that we are only allowed to take part in the site chosen above for food purposes of the SFSP service through the PA Department of Education. I/We also acknowledge that only the Parent/Legal Guardian is permitted to pick the food up for our children.

\_\_\_\_\_  
Parent/Legal Guardian Signature

\_\_\_\_\_  
Date

All of the information above must be completed. Once complete, please return this form to the main office at your child's school.