

2016 DC FREE SUMMER MEALS PROGRAM
INTENT TO PARTICIPATE FORM
Site Recruitment Form

Sponsoring Organization: _____

Site Name _____ # of Sites _____

Contact Person/ Title _____

Address _____ Ward: _____

Telephone # _____ Email Address _____

For Profit _____ Non-profit _____ Site Type _____

Activities Offered _____

Operating: Start Date _____ End Date _____ Days _____

Will you operate on weekends &/or holidays? _____

Month (s)	Estimated Operating days per month	Estimate of Children served per day	Breakfast	Lunch	Snack	Supper
June						
July						
August						
September						
Totals						

Completion of this form does not obligate Site(s) to participate in the DC Free Summer Meals Program for 2016. The primary purpose of this form is to utilize the data to provide preliminary information to the USDA and the Division of Wellness and Nutrition Services on the number of potential sites for summer 2016. Thank you for your interest and continued assistance in providing the children of DC with nutritious meals in a safe environment during the summer.

If you have any questions, please contact your sponsor or you may contact Elisabeth Sweeting; Program Coordinator at the State agency for the DC Free Summer Meals Program at (202) 724-7628 or email at elisabeth.sweeting@dc.gov