



Parent Attestation and Pick Up Form

Instructions-This parent attestation form is to be completed, signed and dated by the parent or guardian picking up meals for students participating in Child and Adult Care Food Programs (CACFP) or At-Risk Afterschool. CACFP Centers and At-Risk Afterschool Sites must keep record of this form, at the center/site, to be reviewed by state agency upon request.

Parent Name _____ Program Receiving meals for: CACFP At-Risk

Entity Name _____ Program Agreement Number: _____

Child's Name _____ Breakfast

Child's Name _____ Lunch

Child's Name _____ Snack

Child's Name _____ Supper

I understand that I can't receive more than the daily maximum of two meals and one snack for each enrolled participant from CACFP or the maximum of one meal and one snack from At-Risk. I further understand that I cannot receive duplicate meals from any USDA Program.

I acknowledge that all information on this form is true. I understand that State Agency may verify this information. I understand that if I purposely give false information, the participant receiving meals may lose the meal benefit through USDA Programs.

Signature _____ **Date** _____

I, the sponsor, acknowledge to the best of my ability, that the above information is correct and will provide meals to the parent/guardian for the above children listed.

Sponsor
Signature _____ **Date** _____