



THE CITY OF
COLUMBUS
ANDREW J. GINTHER, MAYOR

RECREATION AND PARKS
DEPARTMENT

Columbus Recreation and Parks 2016 Summer Lunch Program Agency Application

*Please read and complete ALL information requested and include liability insurance and 501c3 or your application will not be accepted. Applications can be mailed, faxed or emailed. See information letter for contact info. **Application deadline April 15th.***

SITE INFORMATION

Are you a returning summer food service site from 2015? Yes No

Site name:

Site Phone Number (where we can reach you at meal time):

Site address, including city and 9 digit zip ([click to find](#)):

Check which of the following you have access to on site: Internet Email Fax

Site Type (see back page for details): Open Open Restricted Closed Enrolled

School nearest the lunch site:

STAFF INFORMATION

On-Site Supervisor name: Phone:

Email:

Additional staff that are or will be trained to supervise meals:

Name: Phone:

Name: Phone:

Name: Phone:

Agency contact if different from site supervisor:

Name: Title:

Email: Phone:

PROGRAM INFORMATION

Program Dates for summer 2016 from _____ To _____

Days of the week you will be serving: Monday Tuesday Wednesday Thursday Friday

Please list any days that you will be closed:

Are there activities for the children to participate in before and/or after mealtime? Yes No

If yes, please describe:

MEAL and DELIVERY INFORMATION:

What is the earliest the building is open for delivery?

Do you have refrigeration large enough to store all the meals you need? Yes No

Directions for delivery driver. Please be as specific as possible, including information about where to park, how to get in (need to buzz?), what door to use and what room food should be delivered to.

Please fill out the information below based on the 1 or 2 meals you would like to receive. You must allow a 30 minutes window for delivery, so if the building opens at 7:30 you cannot serve before 8 am.

Meal Type	Begin Time	End Time	Estimated Meals Needed Daily	Max You Might Order
Breakfast				
Lunch				
Snack				

How many children can be served indoors?

How many adults will be present during meal time?

Does your agency participate in any Child Nutrition Program (CNP)? Please check:

Child and Adult Care Food Program National School Lunch Program Special Milk

Name of staff completing application:

Date: