Nutrition Services
Kewaskum School District
Lunch Account Management Form

This form allows you to set specific spending guidelines for your child's pre-paid Family Nutrition Services Account. Your instructions will help us ensure funds are used according to your wishes.

Today's Date:_____

Please print:

Parent_____
First M.I. Last

Address_____

Phone Number_____

Parent Signature_____

Please list first and last names of children:

_____

_____

_____

_____

Place a check the appropriate box(es) below *(Check all that apply, if necessary)***:**

- ○ No Lunch
- ○ No Breakfast
- ○ No A la Carte
- ○ Approve A la Carte if child pays with own cash
- ○ 1 Breakfast, 1 Lunch, plus Allow 1 Extra Lunch Entrée
- ○ 1 Breakfast, 1 Lunch, plus A la Carte Daily Spending Limit of…

(*Check the amount that is suitable for the a la carte spending limit)*

- ○ $2.00
- ○ $3.00
- ○ $4.00
- ○ $5.00
- ○ $6.00
- ○ $7.00
- ○ $8.00
- ○ $9.00

PLEASE RETURN TO: TMiller@kewaskumschools.org

Or Mail To:
School Nutrition Program
Kewaskum High School
Attn: Terri Miller
1510 Bilgo Lane
Kewaskum, WI 53040

*****These restrictions do carry over each school year. It is not necessary to fill this out each year.**

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the responsible state or local agency that administers the program or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: https://www.usda.gov/sites/default/files/documents/ad-3027.pdf, from any USDA office, by calling (866) 632-9992, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to USDA by:

1. mail:
U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410; or

2. fax:
(833) 256-1665 or (202) 690-7442; or

3. email:
program.intake@usda.gov

This institution is an equal opportunity provider.