



THE MAY COURT CLUB OF LONDON

feeding children – nourishing hope

May Court School Nutrition Program

If you wish to participate in our program please complete and return this application to the address below.

School Name: _____ Phone Number: _____

School Address: _____

Principal: _____ Phone/Ext: _____

Nutrition Contact Name: _____ Phone/Ext.: _____

Email Address: _____ School Population: _____

Please indicate the program/programs planned for your school and the number of students per week you anticipate will participate:

Breakfast _____ Snack _____ Lunch _____
number per week number per week number per week

Application completed by: _____

If accepted, gift cards and a gift card tracking sheet will be made available to your school. **Additional cards will be issued only when the gift card tracking sheet and receipts for purchases are received. Gift cards are to be used to purchase nutritious food for your nutrition program.**

Applications, receipts and gift card tracking sheet(s) should be mailed to:

**May Court School Nutrition Program
c/o Libby McMillan
3 Glenview Cres
LONDON ON N5X 2P8**