

**North Carolina
Department of Health and Human Services
Women's and Children's Health
Child and Adult Care Food Program**

**Free and Reduced Priced Policy Statement
Sponsoring Organizations of Day Care Homes**

(Name of Institution)

(Agreement Number)

All participants are served the same meals at no separate charge, regardless of race, color, national origin, sex, age or disability and there is no discrimination in the course of the food service.

Additionally, there will be no identification of children in day care home in which meals are reimbursed at both the tier I and tier II reimbursement rates, and

_____ will not make any free and reduced price
(Name of Sponsoring Organization)

eligibility information concerning individual households available to day care homes and will otherwise limit the use of such information to persons directly connected with the administration and enforcement of the Child and Adult Care Food Program.

Approved by: _____ on _____
(Committee responsible for approving policies) (date)

Adopted by Board of Directors on: _____
(date)

Signature of Board Chair
or President of Organization: _____
(Signature) (date)

06/08