

Frisco ISD Child Nutrition Programs
Special Events/After Hours Kitchen Coverage
2017-2018

Type of Event _____

Host Group: _____

Date of Event: _____ Start Time: _____ End Time: _____

Location of Event: _____ # of people expected: _____

Has the principal been informed of after school/weekend use? YES NO

Have you obtained the Temporary Food Establishment Permit? YES NO

THIS FORM IS REQUIRED. You are responsible for obtaining this permit from the Health Department. Copy must be provided with this form.

Equipment to be supplied by Child Nutrition: _____

Cooking supplies to be provided by Child Nutrition: _____

Food to be provided by Child Nutrition: _____

Beverages to be provided by Child Nutrition: _____

Paper products to be provided by Child Nutrition: _____

Comments: _____

Number of CNP employees requested: _____ Hours that Access/Employee is needed:* _____

Facility Rental/Custodians must be coordinated through Jean Corzine at 469/633-6502.

At least one Child Nutrition Department employee is required to be present in the kitchen during access times. The charge per employee is \$50.00 per hour with a minimum of three (3) hours. The kitchen must be left clean with the floor swept and mopped. Failure to do this will result in a \$200.00 clean-up fee.

**Employee will be on site 30 minutes prior to start time and up to 30 minutes after access to kitchen is no longer needed.*

Event Contact:

Name: _____

Phone Number: _____

email: _____

Billing Information:

Name/Organization: _____

Address: _____

Phone: _____

Special events are invoiced after the conclusion of the event. A deposit of fifty percent (50%) may be required prior to confirming event. An estimate of costs can be provided upon request. Cancellation, or changes to food order after order placed with vendor, may result in penalty or forfeiture of deposit.

Return completed form via email to
lavendert@friscoisd.org

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