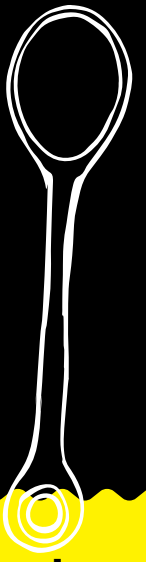




**BLACK RIVER  
LOCAL SCHOOLS**



# Online Learning Meal Questionnaire

**Meals for students enrolled in the Ohio Online Learning Program will be prepared a week at a time (5 days of breakfasts and 5 days of lunches). Parents/guardians may pick up their student's meals for the week every Wednesday via curbside pickup. Students enrolled in online learning MUST FILL OUT THIS QUESTIONNAIRE REQUESTING MEALS.**

Parent Name: \_\_\_\_\_

Parent Email: \_\_\_\_\_

Student(s) First and Last Name(s) and Grade Level(s): \_\_\_\_\_

Name: \_\_\_\_\_ Grade Level: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Are there other children in the household aged 1 to 18 for whom you would like to request meals? If so, how many? Please list your other children here.

Name: \_\_\_\_\_ Age: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Please list any of your student's allergies or dietary restrictions below.

Name: \_\_\_\_\_ Allergy/Dietary Restriction: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_