



Media Release for Non-Pricing Programs

Sponsoring Organization's Name _____

Street Address _____ City _____ Zip Code _____

Contact Person _____ Phone Number _____

Media Outlet(s) Contacted _____ Date _____

Prior to submitting to a media outlet, attach or complete the Income-Eligibility Guidelines chart below by inputting the guidelines for the current year, which are available on www.azed.gov/hns/cacfp/programforms/.

Note: Emergency shelters and at-risk only programs should omit references to income prior to sending to media outlets.

Please print the following, including the non-discrimination statement on the following page, as a free public service announcement.

Today, _____ announced its sponsorship of the U.S. Department of Agriculture (USDA) Child and Adult Care Food Program administered by the Arizona Department of Education, Health and Nutrition Services. Meals will be made available to enrolled participants at no separate charge without regard to race, color, national origin, sex, age, or disability. Household income determines the amount of money institutions will be reimbursed to provide meals to enrolled participants. The income-eligibility guidelines listed below are used to determine the amount of reimbursement.

Household Size	Weekly		Bi-Weekly		2x Month		Monthly		Annually	
	Free	Reduced	Free	Reduced	Free	Reduced	Free	Reduced	Free	Reduced
1										
2										
3										
4										
5										
6										
7										
8										
Additional Members, Add:										

Meals will be provided at the site(s) listed below:

Site Name: _____
Site Address: _____
City, Zip: _____
Phone Number: _____

Site Name: _____
Site Address: _____
City, Zip: _____
Phone Number: _____

Multi-Site Sponsors: Complete one form and attach a list of names, addresses, and contact numbers for all operating sites.

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, audiotope, 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:

mail:

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

fax:

(833) 256-1665 or (202) 690-7442; or

email:

Program.Intake@usda.gov

This institution is an equal opportunity provider.