



## GOOD FOOD BOX INFORMATION AND REGISTRATION

Thank you for your interest in the Good Food Box with Beaver Valley Outreach (BVO). We are looking forward to another great year of healthy eating.

Pick up dates are the third Wednesday of every month, and are listed here:

September 20, 2023	October 18, 2023	November 15, 2023	
December 20, 2023	January 17, 2024	February 21, 2024	
March 20, 2024	April 17, 2024	May 15, 2024	June 19, 2024

**Pick-Up Place and Time:** Beaver Valley Community Centre, Thornbury – Noon to 5 pm **\*BACK ENTRANCE\***

- If you are physically unable to pick up your box, please contact Janice at [volunteer@bvo.ca](mailto:volunteer@bvo.ca)

**Cost:** One Size \$22 per Box

**Payment Details:**

- When you register, you pay for your first month (**\$22.00**) or 2 payments including **Sept -Dec (\$88.00) & Jan-June (\$132.00)**
- Payment can be made by cash, cheque (payable to Grey Bruce Good Food Box) or e-transfer at [payment@bvo.ca](mailto:payment@bvo.ca)
- When you pick up your box, you pay for the next month's box.

**Cancellation Details:**

- If you wish to cancel your involvement in the program or defer your payment to the following month, please contact Janice by phone [519-599-2577](tel:519-599-2577), ext 125, one week before the pick-up date.
- If you do not cancel your box and do not pick it up, it will be donated to someone within our community. This will help us make sure that none of the food ordered is going to waste. The following month you will pay for two months when you pick up your box if you want to continue with the program.

Please complete the Registration Form below and return it to Janice with the first month payment at our BVO office (54 King Street East, Thornbury) by September 5<sup>th</sup>, 2023. If you have any questions, concerns or feedback about the program or need assistance with the cost, please contact Janice by phone [519-599-2577](tel:519-599-2577), ext 125 or email [volunteer@bvo.ca](mailto:volunteer@bvo.ca) Thank you for your involvement in Good Food Box. We look forward to connecting with you each month.

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Size of Box Requested: One Size (\$22)

When I sign below, I am agreeing to the following:

- Payment for the first month of participation in the Good Food Box program.
- If unable to pick up my box, contact Janice at BVO, one week prior to pick up date.
- If I do not inform Janice by the deadline and do not pick up my box, my box will be donated that month and I will pay for two boxes the following month as I continue participation.

Participant Signature: \_\_\_\_\_ Payment Received: \_\_\_\_\_ Staff Initials: \_\_\_\_\_