



**S.H.I.F.T.**  
SUPPORT AND HOPE  
FOR INDIVIDUALS AND FAMILIES TODAY

# MEAL MAKER INFORMATION FORM

Food Product/ Meal Name: \_\_\_\_\_

\_\_\_\_\_

Food Description / Ingredients:

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

Allergens:

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

Food Maker/Donor Name: \_\_\_\_\_

Contact Information:

E-Mail: \_\_\_\_\_

Phone Number : \_\_\_\_\_

Date & Time food was made: \_\_\_\_\_

\_\_\_\_\_  
*PLEASE DO NOT FILL OUT BELOW LINE – FOR OFFICE USE ONLY*

Temperature of food at time of delivery: \_\_\_\_\_

Delivery date and time: \_\_\_\_\_

Recipient: \_\_\_\_\_

Intended Program: \_\_\_\_\_



## **MEAL MAKER INFORMATION SHEET**

*Thank you for your meal donation! Your kindness will help provide a warm, nutritious meal to someone in need. S.H.I.F.T is grateful for your support and commitment to our cause. Thank you for making a positive impact in our community!*

If you are providing meals for the shelter/drop-in program, please use the containers provided to portion out meals and the attached form and labels to provide to staff at the time of your donation.

If you are providing sandwiches for the outreach program, please use the attached form and labels to provide to staff at the time of your donation.

- The attached labels should be filled out with the name of the meal, the date of preparation and any allergens. Please place a completed label on each container/individually wrapped sandwich.
- It is not necessary to make your meal in an allergen-free environment, however we ask that you declare any allergens in your donation. This will allow us to inform recipients accordingly.
  - *Examples of allergens to declare include tree nuts (peanuts, walnuts, hazelnuts etc.), dairy, eggs, fish, wheat, gluten, and mustard.*
- Upon delivery, please ring the doorbell at the side door (to the right of the front door, up the pathway) and wait for a staff member to assist you. If someone does not answer the door within 1-2 minutes, please knock loudly.

If you have any questions, please reach out to S.H.I.F.T at:

[volunteer.coordinator@shiftforgood.ca](mailto:volunteer.coordinator@shiftforgood.ca) OR 705-435-7293 ext. 202



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