

Public Release (Non-pricing Programs)

The The Granite YMCA announces the sponsorship of the U.S. Department of Agriculture funded Child and Adult Care Food Program. The same meals will be available at no separate charge to enrolled children at the center(s) listed below. In accordance with Federal Law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. To file a complaint of discrimination, write USDA, Director, Office of Adjudication, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call toll free (866) 632-9992 (Voice). Individuals who are hearing impaired or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish). USDA is an equal opportunity provider and employer.

YMCA START 333 Beech St Manchester, NH 03103
 YMCA START 401 Wilson St Manchester, NH 03103
 YMCA SOP at Webster School 2519 Elm Street Manchester NH 03104
 YMCA Child Development Center 30 Mechanic Street, Manchester, NH 03101
 YMCA The Children's Center 35 Industrial Way, Rochester, NH 03867
 YMCA SOP at Garrison School 50 Garrison Road Dover, NH 03820
 YMCA SOP at Home School 78 Home St Dover, NH 03820

INCOME ELIGIBILITY GUIDELINES (Effective from July 1, 2020 to June 30, 2021)

FREE MEAL OR FREE MILK GUIDELINES					
HOUSEHOLD SIZE	INCOME (Equal to or Less Than)				
	YEARLY	MONTHLY	WEEKLY	Twice Per Month	Every Two Weeks
1	\$ 16,237	\$1,354	\$ 313	\$ 677	\$ 625
2	21,983	1,832	423	916	846
3	27,729	2,311	534	1,156	1,067
4	33,475	2,790	644	1,395	1,288
5	39,221	3,269	755	1,635	1,509
6	44,967	3,748	865	1,874	1,730
7	50,713	4,227	976	2,114	1,951
8	56,459	4,705	1,086	2,353	2,172
For each additional Household member add	+ \$ 5,746	+ \$ 479	+ \$ 111	+ \$ 240	+ \$ 221

REDUCED PRICE MEAL GUIDELINES					
HOUSEHOLD SIZE	INCOME (Equal to or Less Than)				
	YEARLY	MONTHLY	WEEKLY	Twice Per Month	Every Two Weeks
1	\$ 23,107	\$1,926	\$ 445	\$ 963	\$ 889
2	31,284	2,607	602	1,304	1,204
3	39,461	3,289	759	1,645	1,518
4	47,638	3,970	917	1,985	1,833
5	55,815	4,652	1,074	2,326	2,147
6	63,992	5,333	1,231	2,667	2,462
7	72,169	6,015	1,388	3,008	2,776
8	80,346	6,696	1,546	3,348	3,091
For each additional Household member add	+ \$ 8,177	+ \$ 682	+ \$ 158	+ \$ 341	+ \$ 315

Note: The press release should contain both the free and reduced price scale. The letter to the parents for meal programs must only contain the reduced price scale. The letter to the parents for the Special Milk Program must only contain the free price scale.

Contact Person Adrienne Royal _____
 Publication The Union Leader _____
 Telephone No. 603 232 8694 _____ Date 9/1/19 _____

This institution is an equal opportunity provider

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