

PASS A PLATE  
EMERGENCY MEAL PROGRAM  
ACWORTH GA 30102  
404-279-2461 OFFICE  
EMAIL: [PASSTHEPLATE19@GMAIL.COM](mailto:PASSTHEPLATE19@GMAIL.COM)

What is Pass A Plate?

Pass A Plate is a mobile app created by Will2Way Foundation Inc. as an initiative to combat hunger of children/college students (under the ages of 21). Our Pass A Plate mobile app will allow the registered recipient (with a created profile) an opportunity to sign in and request a meal(s) for a child/children or college student (under the ages of 21) in need. Once the request has been received and approved and a sponsor donates a meal, a notification will be sent via text or email to proceed to any participating (partner) restaurants within one (1) hour of receiving the one-time code (information will be provided via text or email). Our Pass A Plate app anticipated release date is 2/15 and meals will be available on 2/16. The recipient must log onto the Pass A Plate mobile app or notify (via email) Will2Way Foundation that a meal is needed for the child/children listed on the created profile. (NOTE: child/children or college student must be listed at time of meal request). All profile information must be completed accurately and honestly. NOTE: An updated profile form is required every 90 days or when a total of 40 meals have been received.

This is a referral form for emergency meal assistance for children and college students (under the ages of 21) in need of a meal. Please be mindful the Pass A Plate mobile app has been developed to combat childhood hunger. All meals will have a \$10 value and no monetary funds will be tendered to the recipient. The recipient will only receive a one-time code for redemption at participating (partner) restaurants.

Please return form to your child's counselor, or to Will2Way Foundation Inc. by email at [Passtheplate19@gmail.com](mailto:Passtheplate19@gmail.com)

Name of adult/guardian: \_\_\_\_\_

Date: \_\_\_\_\_

Child's School \_\_\_\_\_

City: \_\_\_\_\_

Zip Code: \_\_\_\_\_

County: \_\_\_\_\_

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

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



**Please print NAMES and AGES of all household members:**

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Do you receive Government assistance? Yes \_\_\_\_\_ No \_\_\_\_\_

Stamps used by: This information will inform us of how often

Used Up Before End of Month; Unplanned Expense; No Income;

Recently Unemployed; Emergency: (Briefly Describe): \_\_\_\_\_

How many times per week will you need our services? \_\_\_\_\_

Contact our office for details:

Pamela Whitfield

404-279-2461:O

404-201-4532:C

[Will2wayfoundation@gmail.com](mailto:Will2wayfoundation@gmail.com)

