

Great Meals for a Change Sign Out Sheet

Name of Borrower	Kit#	Phone #	Email	Deposit paid: _____	Sign out date:	Return date: (3 week max)	Did you host meal? Yes ____ No: ____ # of guests? _____
How did you hear about Great Meals for a Change? Please check... <input type="checkbox"/> Participated in a Great Meal hosted by someone else. If so, who hosted your meal? _____ <input type="checkbox"/> Website (www.greatmealsforachange.ca) <input type="checkbox"/> Other, please describe: _____							
Can we contact you to ask about your experience with Great Meals for a Change after your meal? Yes () No () Please write any comments or suggestions on the back.							

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Once this sheet is full, either scan and email it to info@greatmealsforachange.ca, or fax it to (902) 585-1702. Thanks!