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|  | Northern Association of Community CouncilsNorthern Healthy Foods Initiative 9-395 Berry StreetWinnipeg, MB R3J 1N6Phone: 1-204-947-2227 Ext. 2 Toll Free: 1-888-947-6222 Fax: 204-947-9446 Email: programnhfi@naccmanitoba.com |

# Poultry Program Agreement 2024

## Applicant Information

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Full Name: |  | Community:  |  |  | Date: |  |
|  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Physical / Shipping Address: |  |  |  |  |  |  |  |
| Mailing Address: |  |  |  |  |  |  |  |
|  | Street Address |  | City/Town/Village |  | Province | Postal Code |  |
| Home/Work Phone: |  | Cell | :  |
| Fax: |  |  Email | :  |

Amount approved for Element A, B, and C is a total of \_\_$\_\_\_\_\_(Breakdown: for chicks and feed:\_$\_\_\_\_\_\_for heat lamps, water feeder, bedding, chicken wire, chicken coop repairs: \_\_\_\_\_\_\_, and travel subsidy of \_\_\_\_\_\_ for round trip of \_\_km X 2 X $0.41 to hatchery agent and to pick-up coop supplies).

## Poultry Program Participant Responsibilities

Please review the following requirements and sign agreement to:

* Submit receipts for reimbursement not later than **September 15, 2024**, **but preferably ASAP after purchase in spring, 2024.**
* Carry out poultry activities within the assigned NACC Northern Healthy Foods Initiative boundary
* Ensure the technical and structural adequacy and legal requirements of this project, including local by-laws.
* Provide NACC information necessary to the project including premises access (to staff of NACC and persons authorized by NACC) for evaluation, demonstration, audit and public information purposes upon request.
* \*Participant will complete annual surveys and/or reports and submit with photos of coops, birds, participants and butchering via mail, phone or e-mail.
* I understand the value in raising poultry with initial support through the NHFI program (i.e. saving money over the year leading to physical activity and consumption of healthy foods will result in savings in overall household food expenses which in turn should/could free up income to support operations in future years).
* This Poultry Program Agreement must be signed and returned within 30 days of receipt or will be forfeited.
* Reimbursement payments will only made with proof or purchase and in/to the name of the participant indicated.
* Reviewed and agree to follow the “Chickens” resources/guidelines (http://naccmanitoba.com/nhfi/resources/) including: Managing a Small Poultry Flock and Poultry Manuals.
* Agree to submit a “Premises with Poultry application” to the Manitoba Government upon receiving chicks. Email: traceability@gov.mb.ca For more information, contact your local Manitoba Agriculture Office, call Manitoba Government Inquiry at 1-866-626-4862.
* Review and follow safe food handling while butchering/handling/cooking. NACC recommends all producers acquire a Food Handlers Certificate (producers may request course fee subsidy from NACC).
* Give permission for the use of the photographs taken of me, or my children listed on this form, by the partners of the Northern Healthy Foods Initiative for the purposes of publication, display or exhibition thereof for articles, promotions, websites and visual presentations and without payment or compensation to me. I understand that these photos may be used to tell the story of northern Manitoba communities taking action and leading efforts to improve food security, community economic development, youth engagement, or population health. By signing below, I acknowledge this as a Photograph Release Form, and I confirm that I am over 18 years of age and/or a guardian of the participant(s).

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

**SIGN and return to NHFI - RETAIN A COPY FOR YOUR RECORDS**

Northern Association of Community Councils - Northern Healthy Foods Initiative

9-395 Berry Street

Winnipeg, MB R3J 1N6

Fax: 204-947-9446

Email: programnhfi@naccmanitoba.com

**NACC NHFI Poultry Program Report 2023 Deadline:** September 15, 2024 or **ASAP after butchering**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Full Name: |  |  |  | Date: |  |
|  |  |  |  |  |  |

|  |
| --- |
| 1. How many years of experience do you have with poultry?
 |
| 1. How much food was produced this year (**lbs of meat**)?total lbs:

Total # of birds survived to butchering: |
| 1. Rate your satisfaction with the poultry production (circle one)very low        low            acceptable      high    very high
 |
| 1. Please describe your poultry activities (type, improvements made, # of birds)
 |
| 1. Did you lose any birds? Yes / No If yes, how many? \_\_\_\_\_\_\_\_
 |
| 1. Did anything become damaged? Yes / No If yes, how/what/when? \_\_\_\_\_\_\_\_
 |
| 1. What did you learn?
 |
| 1. How did you and your family and community benefit from this program?
 |
| 1. How many people were involved? How many were youth (under 30-years-old)?
 |
| 1. How many people (besides your family) benefited from the poultry activity and how?
 |
| 1. Did you experience any challenges? Please describe.
 |
| 1. Anything else to share? What would you like to accomplish in the future?
 |

**Submit required photos of the chicken coop, chickens, and participants, along with the report to:**

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