



TERMS, CONDITIONS & SERVICE AGREEMENT FORM

Elevating Meals, Empowering Lives

ISSUED TO:

NAME:

CONTACT NUMBER:

EMAIL ADDRESS:

DELIVERY ADDRESS:

INVOICE NO:

DATE:

ORDER DATE:

1. SERVICE DESCRIPTION

Ascent Cuisine provides tailored meal preparation, storage, and delivery services in full compliance with National Disability Insurance Scheme (NDIS) requirements. Our services are designed to deliver nutritious, personalised meals that cater to individual dietary and health needs, ensuring both convenience and sustainability.

Meal Customisation:

- Meals are specifically tailored to accommodate each participant's unique dietary needs, cultural preferences, and health conditions.
- Ascent Cuisine collaborates with participants to ensure that all meals meet their individual nutritional requirements, and modifications can be made based on feedback from the participant or their healthcare provider.

Flexible Service Options:

- Participants have the option to select either weekly or fortnightly meal delivery, providing flexibility to meet individual preferences and needs.
- The chosen meal delivery schedule can be adjusted with prior notice and mutual agreement between the participant and Ascent Cuisine.

Personalised Meal Preparation:

- Meals are prepared on a weekly or fortnightly basis, with careful attention to the participant's dietary, cultural, and health goals.
- Menus are designed to address any specific medical conditions or nutritional objectives, ensuring meals support the overall wellbeing of the participant.

Grocery Shopping Service:

- Ascent Cuisine provides a custom grocery shopping service to ensure that only the necessary ingredients for the participant's meal plan are purchased.
- Grocery costs generally range from \$150 to \$200 per fortnight, depending on the specific protein requirements and meal complexity. These costs are reimbursed by the participant, and any changes to grocery costs will be communicated in advance for agreement.

2. MEAL STORAGE & DELIVERY TERMS

For cooked meals, proper storage is essential to maintain safety and quality. Please follow the guidelines below:

- **Refrigeration (at or below 4°C / 40°F):**
 - Consume within 3–4 days for best quality and safety.
 - Ensure meals are stored in **airtight containers** to prevent contamination.
- **Freezing (at or below -18°C / 0°F):**
 - For optimal quality, consume within 2–3 months.
 - Ensure meals are stored in **sealed containers** to preserve freshness and prevent freezer burn.
- **Meal Handling:**
 - Always allow meals to cool down before refrigerating or freezing.
 - When reheating meals, ensure they reach a safe internal temperature of at least **74°C / 165°F**.
 - Avoid reheating meals more than once to maintain food safety.
- **Rice Handling:**
 - For cooked rice, it must be cooled quickly after cooking and stored immediately. This reduces the risk of **Bacillus cereus** growth, which can lead to foodborne illness.
- **Meal Freezing and Delivery:**
 - For participants without adequate storage, meals are **frozen and delivered** at a convenient time to ensure accessibility and food safety. This ensures that meals are stored properly until they can be used by the participant.

2. Participants' responsibilities

- Inform Ascent Cuisine of any allergies, dietary restrictions, or cultural preferences that may affect meal preparation.
- Notify Ascent Cuisine of any changes to meal preferences or nutritional requirements promptly.
- Ensure meals are stored safely upon delivery to maintain their quality and safety.
- Provide accurate and up-to-date information regarding dietary needs, health conditions, and preferences. Participants are responsible for notifying Ascent Cuisine of any changes to this information.
- Understand that Ascent Cuisine is not responsible for any allergic reactions or adverse health effects that may arise from consuming meals, as meals are prepared based on the information provided by the participant. Participants must ensure that any known allergies, medical conditions, or dietary restrictions are communicated clearly to Ascent Cuisine.
- Adhere to any minimum commitment periods or other conditions as outlined in the full Terms and Conditions of the service agreement.

4. CANCELLATION POLICY & REFUND POLICY

Purpose:

This policy is designed to establish clear, fair, and transparent terms regarding cancellations and refunds, ensuring protection for both the participant and the provider.

Cancellation Terms:

- **Cancellations** may be made **up to 72 hours** prior to the scheduled delivery without incurring any fees.
- **Cancellations** made **less than 72 hours** before the scheduled delivery will incur a **cancellation fee of 50% of the total order value**.
- Once **groceries have been ordered** for a specific meal plan, **no cancellations** will be permitted within **72 hours prior to delivery**. This policy is in place to account for the procurement of fresh ingredients and to avoid waste.
- **No refunds** will be issued on the **day of delivery**, except in cases of **extenuating circumstances** such as **illness** or **emergency**. In such instances, the participant must provide **appropriate documentation** (e.g., a medical certificate, police report) to substantiate the claim.
- Any **approved refunds** will be processed within **7 business days** following the approval of the cancellation request.

Participants' Responsibilities:

- Participants must provide written notice of any **cancellation** or **refund request** via email or telephone, with sufficient notice to allow processing as outlined in this policy.
- Participants are responsible for ensuring that **someone is available to receive the meal delivery**. If no recipient is available at the time of delivery, the provider reserves the right to cancel or reschedule the delivery at the participant's expense.

Provider's Right:

- The provider reserves the right to **cancel or reschedule** any meal delivery due to **emergencies, supply chain issues, or other unforeseen circumstances**, in which case the participant will be notified promptly.

Limitation of Liability:

- The provider's liability in relation to cancellations and refunds shall be limited to the amount paid by the participant for the specific order that is being cancelled. The provider will not be liable for any indirect, consequential, or incidental losses or damages resulting from the cancellation of services.

5. MEAL ORDER SERVICE DESCRIPTION

Meal Delivery Frequency:

- Participants can choose between **weekly** or **fortnightly** meal delivery services, tailored to their preferences and dietary needs.

Pricing Structure:

- The cost for the meal delivery service ranges from **\$150 to \$200** per delivery cycle.
- The final price will be determined based on the participant's **specific protein needs** and **overall nutrition requirements**, as assessed and discussed with our team.

Payment Terms:

- Payment will be confirmed and arranged following a comprehensive assessment of the participant's dietary preferences, requirements, and service plan. The **final cost** will be communicated to the participant once all details are agreed upon.

NDIS Funded Labor Cost:

- Meal preparation services are billed at \$55 per hour, covered by NDIS funding, ensuring affordability for participants.

Sustainability and Waste-Conscious Approach:

- Our service adopts a waste-conscious approach, minimizing food waste by purchasing only necessary ingredients and using them efficiently during meal preparation. Ascent Cuisine focuses on delivering highly practical, tailored, and immediate solutions to meet participants' everyday needs while ensuring convenience and sustainability.

AGREEMENT ACKNOWLEDGEMENT

By signing below, participants agree to the terms of the service agreement.

PARTICIPANTS FULL NAME: _____

PARTICIPANTS SIGNATURE: _____

DATE: ____ / ____ / ____

OFFICE USE ONLY

PROVIDER FULL NAME: _____

PPROVIDER SIGNATURE: _____

DATE: ____ / ____ / ____



ALLERGY DECLARATION FORM

Elevating Meals, Empowering Lives

Before placing your order, please provide details of any food allergies or dietary restrictions. This helps us ensure your meal is prepared as safely as possible.

Please specify any allergies or intolerances:

(✓ Tick all that apply and add details if needed)

☒ Gluten (Wheat, Soy Sauce, etc.)

☐ Yes ☐ No

☒ Dairy (Milk, Cheese, Butter, etc.)

☐ Yes ☐ No

☒ Eggs

☐ Yes ☐ No

☒ Soy (Soy Sauce, Tofu, etc.)

☐ Yes ☐ No

☒ Nuts (Peanuts, Tree Nuts, etc.)

☐ Yes ☐ No

☒ Sesame (Sesame Oil, Seeds, etc.)

☐ Yes ☐ No

☒ Seafood (Fish, Shellfish, etc.)

☐ Yes ☐ No

☒ Garlic & Onion

☐ Yes ☐ No

☒ Other (Please specify):

Severity of Allergy:

- ☐ Mild (Can tolerate small traces)
- ☐ Moderate (Avoids ingredient but no severe reaction)
- ☐ Severe (Strict avoidance required – risk of anaphylaxis)

EMERGENCY CONTACT INFORMATION:

EMERGENCY CONTACT NAME:

EMERGENCY CONTACT NUMBER:

RELATIONSHIP TO PARTICIPANT:

ADDITIONAL NOTES OR REQUESTS:

⚠️IMPORTANT NOTICE:

While we take precautions, our meals are prepared in a shared kitchen where allergens are present. We cannot guarantee 100% allergen-free meals. If you have severe allergies, please contact us before ordering.

In case of an allergic reaction, please seek immediate medical assistance. If you are unsure about managing allergies in a catered meal context, we recommend consulting a medical professional for guidance.

Acknowledgment of Allergen Risks:

By signing below, I acknowledge the potential risks associated with allergens in the shared kitchen environment and accept that the provider cannot guarantee 100% allergen-free meals.

Signature:

Date: ____ / ____ / ____