



Food, Allergy & Nutrition Form

I give permission for my child _____ to participate in all food related activities. Please complete the entire form and initial or complete with N/A if it is not applicable to your Child and then sign and date at the bottom.

Please check one of the following:

_____ My child DOES NOT have a food allergy or dietary restriction.

_____ My child DOES have a food allergy or dietary restriction. He or she may participate, but may not eat or handle the following items (please list below)

_____ My child DOES have a food allergy or dietary restriction. He or she may not participate in activities.

_____ If your Child has been diagnosed with a food allergy proper physician documentation and an emergency care form must accompany any request for dietary restrictions. All items must be completed prior to admission.

_____ If your Child has the proper documentation to verify food allergies. The Guardian is responsible to Provide all meals and snacks

_____ If your Child has a milk sensitivity is Vegetarian or Vegan. Parent/Guardian is responsible for supplying all supplemental items. Example Almond Milk, Soy yogurt ...

_____ I will provide a healthy peanut free lunch for my Child on a daily basis. (No soda or Candy)

_____ I understand that if my Child does not have a healthy lunch containing items to complete a well balanced diet. One will be provided by the school and I will be charged for the items supplied.

_____ I will include an ice pack if necessary to keep items from spoiling.

Parent Signature

Date