(This **FOOD PERMISSION FORM** is to be used when food will be part of a schoolsponsored **BEFORE/AFTER SCHOOL ACTIVITY** taking place on school grounds.)

REMOVE THIS LINE AND ABOVE INSTRUCTIONS. PRINT ON SCHOOL LETTERHEAD

(date)

Dear Parent(s)/Guardian(s),

On (day of the week), (date) our group will be having (indicate specific food/drink here) as part of our (fill in the blank) activity. We have a number of students with life-threatening allergies and significant dietary restrictions that may preclude their use or consumption of certain foods or drinks. For this reason we are attaching an ingredient list for the consumables that will be presented. None of the foods/ drinks will be home-cooked; all will be commercially prepared.

Please fill out the lower portion of this form and indicate whether your child can eat and/or physically handle the foods or drinks mentioned above and return it to me. If you do not return this form your child will not be given the food or drinks listed.

Thank you for helping us to keep your child safe at school.

Sincerely,

Teacher

	\Box My child can fully participate in this activity, including eating the food/drink(s)
	indicated.
	\Box My child can be in the room but should not touch or ingest the food/drink(s)
	mentioned. (Under "Comments" please indicate whether you will send an
	alternative).
	\Box My child should <i>not</i> be in the room during this activity.
	Comments:
Child's Name	
Parent's Name (printed)	
Parent Signature	

Reviewed: 07/2017