



Food Experience Permission Form

I give permission for my child _____ to participate in food related activities.

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.

Student Lunches

Skycrest Christian Preschool will provide every family Healthy Eating for Preschoolers pamphlet from the U.S Department of Agriculture. Please follow these guidelines when feeding your child at home and when you are sending your child's lunch to school.

The Snacks served by Skycrest Christian Preschool will include food from 2 food groups. The food groups served is recorded in your child's classroom for your review.

If Food is Supposed to be kept cold, the food must be stored in a refrigerator until eaten or parents must include ice packs to keep food cold.

Parent Signature

Date