All students must complete section A and have a signed food allergy notice on file to participate.

SECTION A: NOTICE OF FOOD ALLERGY OR DIETARY RESTRICTION

☐ YES, I have a food allergy or dietary restriction.  
Please complete section B below, detailing any food allergies or dietary restrictions.

☐ NO, I do not have a food allergy or dietary restriction.  
Please sign below, confirming you are free of any food allergies or dietary restrictions.

SECTION B: DESCRIPTION OF ALLERGY OR DIETARY RESTRICTION

List any food allergies:  
__________________________________________________________  
__________________________________________________________  
__________________________________________________________  
__________________________________________________________  
__________________________________________________________

List any dietary restrictions:  
__________________________________________________________  
__________________________________________________________  
__________________________________________________________  
__________________________________________________________  
__________________________________________________________

Student’s full name ____________________________________________
Signature _____________________________________________________ Date________________________

Parent/Guardian’s name _________________________________ Primary phone _____________
Signature __________________________________________________ Date________________________