**Food Permission Form**

**Exploring Family and Consumer Sciences**

During the semester, students will complete a module related to the planning and preparation of meals. As we explore the impact of food choices on a healthy lifestyle, we will learn about MyPlate- a guide to healthy eating, analyze meals and snacks, and perhaps the most anticipated part of the course- demonstrate kitchen safety, sanitation, and food preparation skills as we cook in small groups.

Students are encouraged to try all foods prepared in class even it is just a spoonful. Students are **not** penalized if they choose not to try the prepared food. It is strictly on a voluntary basis.

Please inform me of any food allergies or food restrictions your student may have so I will be able to meet the needs of all students.

In order for your child to participate in all food activities, please sign this form which I will keep on file.

Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please check on the following:

\_\_\_\_\_ My child may eat any food he/she desires.

\_\_\_\_\_ My child may NOT eat any food or drink prepared in class.

\_\_\_\_\_ My child may eat any food or have any drink with the exception of what I have listed below.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_