

Dear Parents/Guardians,

From time to time Highland Reserve State School students are encouraged to participate in cooking various healthy foods. In some cases, we may eat our cooking at school otherwise it will be sent home as a family treat. In order for your child to be involved in these activities during the year, this form needs to be completed and returned.

Unfortunately, if this form is not returned to school, students will not be able to eat any of the food that has been prepared.

Student's name: _____

Year Level: _____ Class: _____

Food allergies: YES / NO

If yes, please indicate

Cultural restrictions: YES / NO

If yes, please indicate

I give permission for my child to participate in cooking activities.

Parent/Guardian name: _____

Signature: _____ Date: _____