Kids in the Kitchen Aberdeen Allergy Form

In order to ensure the safety and wellbeing of each student, this allergy form must be completed and attached to the kids in the kitchen registration form, this must be used for any class involving food preparation. Due to the serious nature of food allergies and restrictions, students may be restricted from full class participation. Please feel free to discuss.

Parent/Guardian Name	
Class Time and venue	
Please complete and initial each area providing as much detailed information as possil Example - My child is allergic to wheat. She/he breaks out in hives when she/he tou	
anything that has wheat in it. The following procedure should be followed if this happens	
(Initial) My child has the following food allergies None	
(Initial) My child has the following reaction to the food listed above	
(Initial) My child is on a special diet/food restrictions. The special diet/food restrictions and listed belowNone	
I understand that if any of this information changes it is my responsibility to contacthe teacher and complete a new allergy form. I also understand that in my initialing this form I agree to in no way hold the teacher or any other person responsible for rehild's condition or any resulting complications which may arise from attending this c	of ny
Parent/Guardian SignatureDateDate	