School District of the Chathams

| Dear Parent: | |
|---------------------|--------------------------------------------------------------------------|
| Your ch | ild's class is planning to celebrate a special food/ instructional event |
| on | The items or foods being used in this special instructional |
| event are follow | ving: |
| | |
| Please complete | e the bottom of this form indicating how your child might participate |
| in this special e | vent. Please return to me as soon as possible prior to the scheduled |
| event. | |
| | |
| (Signature of te | eacher) |
| My child | will participate in this special class event. |
| My child | will not be participating in this class event; I will |
| contact the tead | cher to arrange for an alternative activity during this time. |
| My child | will bring his/her own foods and drink for this special class. |
| My child | may only eat during this special class. |
| (Signature of p | arent) |