Feeding Our Kids

Parental Consent Form

Dear Parents/Guardians,

Feeding Our Kids, in partnership with local organizations and volunteers, is pleased to inform you that we will be offering a weekly Friday food program. The *Feeding Our Kids* program provides a small bag of easily prepared, nutritious foods in your child's backpack at the end of each school week at no cost to you. This food is to remain in the backpack until your child arrives home. Please complete the form below if you are interested in having your child participate in the program. Please contact the social worker at your child's school with any questions.

……

My child_____ has my permission to participate in the *Feeding Our Kids* program.

Please list any food allergies or dietary restrictions your child has:

_____

By signing this form, I understand

1) That all food should remain in my child's backpack until arriving home
2) Food bags should be checked by an adult for any allergens affecting my child
3) Foods received may be near or past their "Best By" date *(Per FDA guidance, dates on food packaging are "Best if Used by" and do not impact food safety. Feeding Our Kids will make every effort to deliver food prior to listed dates; however, some food items may be past the listed date. Such food will still be safe, and this will be determined in concert with the Eastern Illinois Foodbank and FDA guidelines.)*
4) That I assume any and all risks regarding the consumption of food including adverse reactions and release *Feeding Our Kids*, the school district, and district personnel from any liability associated with participation in the program including any and all adverse reactions my child may have to foods consumed

Parent/Guardian signature & Date_____