



The Patch Cooking Classes

As part of "The Patch" Kitchen Garden Program, we give the students the opportunity to grow, harvest, cook and eat produce from their own school garden. The fee for this program will be on your Family Statement. Your child will be given the opportunity to participate in Cooking Classes as part of this program.

We need to know whether your child has any allergies or intolerances, or if they are not to eat certain foods due to cultural reasons. We require a completed parental consent form that covers your child for the year. We will refer to this form throughout the year.

Please complete the form below and return to the classroom teacher. Students cannot participate in the program unless this form has been returned.

Please notify the school immediately if your child is diagnosed with any allergies or intolerances during the year

The Patch Cooking Class Permission Form

Student Name: _____ Grade: _____

Allergies: _____

Food Intolerances: _____

Food child cannot eat for cultural reasons: _____

I, (please print name of guardian) _____ give permission for my child to participate in the Patch program and agree to pay/have paid the associated levy.

Parent Name: _____

Parent Signature: _____ Date _____