Auburn South Pre-School

FOOD INGREDIENTS LIST

Name of food .....

Date for consumption.....

Group (please circle) Yellow Blue Red Green Purple

Prepared by .....

List of ingredients

- .....
- .....
- .....
- .....
- .....
- .....
- .....
- .....
- .....
- .....

Name of parent……

Signed…….Date……./……./……

Children who are <u>NOT</u> to receive this food		**<u>Allergy</u> sufferers who <u>ARE</u> approved to receive this food**	
Child's name	*Parent's signature*	*Child's name*	*Parent's signature*