FOOD INGREDIENTS LIST

Note: Please remember to complete and provide this form to staff at the session *prior* to the session the food will be provided, to allow families to read and sign if food is /is not allowed. Thank you.

•		•		•
Name of food				
Date for consumption				
Group (please circle or highlight)	Dingo	Bilby	Puggle	Joey
Prepared by				
List of ingredients				
•				
•				
•				
•				
•				
•				
•				
•				
Name of parent				
Signed				
Date/				

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