



Food Allergies Checklist

Child's Name: _____ Age: _____

Please place a check mark by the food item that your child may be allergic to or may have an allergic reaction to.

- | | | |
|---|---|-------------------------|
| <input type="checkbox"/> Snyder's Mini Pretzel | - | Contains wheat |
| <input type="checkbox"/> Austin Animal Crackers | - | Contains wheat |
| <input type="checkbox"/> Gold Fish | - | Contains wheat and milk |

For snacks children will be served individually wrapped snacks, bottled water, and boxed juices.

Parent's Signature: _____ Date: _____