

# MARLBOROUGH PUBLIC SCHOOLS

## FOOD IN THE CLASSROOM CONSENT FORM

Your child's class will be using food (s) as part of the curriculum on

\_\_\_\_\_ (date(s). Please return the signed permission form by

\_\_\_\_\_ (date) if you want your child to participate.

\_\_\_\_\_  
I, \_\_\_\_\_ (parent/ guardian) hereby consent to  
participation by my child, \_\_\_\_\_ (child's name) to participate  
in \_\_\_\_\_ (teacher's name) class on \_\_\_\_\_  
when the following food(s) will be \_\_\_\_\_ consumed or \_\_\_\_\_ used by the students.

\_\_\_\_\_  
Signature of Parent/ Guardian

\_\_\_\_\_  
Date