

# Bright Children Montessori Academy

## Dietary Restrictions Allergies – Food and Environmental

Please print and be specific. If any of these changes, please make sure to inform the staff.

Child's Name \_\_\_\_\_

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_



NO, my child has no known allergies or dietary restrictions.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**‘Knowledge, Wisdom and Leadership’**