Dear Parents and Guardians,

Please be aware that **Cultural Festivals** involving food items from various spanophone cultures are a part of the Spanish curriculum during the **2015-2016 school year.** For these "Fiestas," students will be asked to prepare a food item from a spanophone culture and bring it in to share with the class.

If your son/daughter has any food allergies or dietary concerns, please notify me.

If you wish to have your son/daughter excused from participating in these cultural activities, I will be happy to provide an alternate assignment.

Please initial one of the following items, sign the authorization form, and ask your student to return it to me in class.

As parent/legal guardian, I hereby authorize and g	ive permission for my child,
, to particip	ate in the cultural activities involving food from
spanophone cultures. I understand that regional dishes wil	be brought in from home by students in class. My
child has no food allergies or sensitivities. I give permission	for my child to eat food items brought in by other
students.	
or	
As parent/legal guardian, I hereby authorize and g	ive permission for my child,
, to participate	e in the cultural activities involving food from
spanophone cultures. I understand that regional dishes wil	be brought in from home by students in class. My
child has the following food allergies and/or sensitivities:	
Other than the items listed, I give permission for my child to	eat food items brought in by other students.
or	
As parent/legal guardian, I request that my child, _	, be giver
an alternate activity in lieu of the cultural activities involving	g food from spanophone cultures.
I understand that one of the objectives in this lesson is to may supervise my child in preparing a dish, but I will not m	
Student Name (please print)	Date
Parent/Guardian Signature of Student listed above	