

Overnight Field Trip Dietary Permission Form (Non-Kosher)

Student Information

First Name	Last Name	Grade

I give permission for my child(ren) to consume **vegetarian and/or dairy food at restaurants or cafeteria facilities which are not kosher certified** during **Shalom School overnight field trips**. This permission applies to all overnight field trips for grades 3-6 during the **26-27 school year** and does not require additional consent each time.

Printed Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Date: _____