

Harvard Elementary School

Allergy Aware Table

My child, _____ has severe food allergies which necessitate him/her to be prescribed an Epi-Pen for use in an emergency. I _____ want my child to sit at the “allergy aware” (do, do not) table in the cafeteria at Harvard Elementary School. If my child does not sit at the “allergy aware” table during school lunch there is a greater risk of him/her coming in contact with the offending food. If my child sits at the “allergy aware” table he/she is allowed to bring one friend who must follow the rules that are in place to keep the children safe. A copy of these rules can be obtained from the nursing office.

(Parent Signature)

(Date)