

Healthy Eating and Cooking Club

4th & 5th Graders



We are so excited to be able to once again offer this afterschool club to our students. For everyone's safety, we will be limited to **12 students** and those selected will be **drawn from a lottery**.

WHEN: Tuesdays, 3:45-5:15pm
Sept. 12, 19, 26, Oct. 3, 10, 17

WHERE: The middle school kitchen

COST: \$20 per student (Please DO NOT send money in UNTIL you are notified your child was selected for the club.)

Parents are responsible for picking up their student **promptly at 5:15.**

Healthy Eating and Cooking Club

PERMISSION FORM



Student Name: _____

Teacher: _____

Allergies: _____

I give permission for my student to stay after school and participate in the 4/5th Gr. Healthy Eating and Cooking Club. I also agree that I will pick my student up at 5:15pm after the club has ended.

Parent Signature: _____

Date: _____