



NUT-FREE TABLE WAIVER

My child has a nut allergy. The school has offered a nut-free table for my child. I wish to decline.

Date: _____

Student Information:

First Name: _____ Last Name: _____

Parent Information:

First Name: _____ Last Name: _____

Parent Signature: _____

Upon completing this form:

**Scan and email completed form to Jessica Akiyama: jacqueline.villalba@heritageoak.org*

You may also turn the form in to the front office or your child's teacher.