

DMS Healthy Snack Agreement/Permission

Dear Middle School Parents/Guardians:

Again this school year the Dodgeville Middle School students will have an opportunity to purchase healthy snacks before school.

Each day from 7:00-7:40 am students may stop by and purchase an inexpensive snack. The money for the snack will come out of the student's lunch account as an 'ala carte snack purchase'. Students must have a positive lunch account balance in order to purchase a snack for break. No juices, milk or Gatorade will be allowed and all students are expected to clean up after themselves.

There is also a chance to help out fellow students that may not be able to afford snacks at this time. One of our priorities is for all students to have this opportunity!

The cost is 50 cents a day and includes options such as fruit, crackers, breakfast bars and sometimes fruit snacks. Students are not required to purchase a snack every day if they sign up for the program. Money will only be taken out on days that snacks are purchased, just like our current lunch system.

Please review the following options and return this form to the DMS Office by the end of the first week of school. If you would like to change your child's snack shack status or have any questions please contact us at 935-3307 option 3. If we have not received explicit permission, we will take that as a "No Thanks, .."

Student Name: _____ Grade: _____

_____ I give my child permission to purchase one snack a day and the money can be taken out his/her lunch account. I further understand that the lunch account must have a positive balance in order to purchase snack items.

_____ I would like my child to have the opportunity to purchase healthy snacks but cannot afford it at this time. Please consider helping my child with a sponsorship.

_____ No thanks, I would not like my child to purchase any snacks.

_____ I would like to help sponsor a child. Any amount will be appreciated, but it would cost around \$72.00 for a student to purchase a snack every day of the school year. Checks written to DMS.

Amount Donated: _____

Parent/Guardian Name: _____

Parent/Guardian Signature

Date