



Clover Ridge Healthy Snack Program



Clover Ridge Elementary is offering a healthy snack choice for students each day because good nutrition is linked to better behavior and academic performance. Children who are hungry have trouble concentrating and learning to their potential. There are also many students with food allergies and ensuring a safe classroom environment for them is very important to us.

Through a generous grant from SHIP, Statewide Health Improvement Program, we have purchased a snack cart, and have it stocked with healthy food choices like fresh fruits or vegetables, cheese sticks, low-fat yogurt, whole grain crackers, and pretzels. Our goal is to provide choices that meet the nutritional standards of Action for Healthy Kids and the Alliance for a Healthier Generation. All items will be peanut/tree-nut safe, and students with wheat, soy and/or dairy allergies will always have a safe choice.

The snack cart will be brought to your child's classroom at snack time, where they will have a choice of healthy options. Teachers will have a list of students enrolled in the program.

Although we must charge a fee to operate the program, it is a reasonable amount of only \$55 per student for the entire year (discounted if you pay for the whole year). Families are free to sign up for the entire year or for a half year at \$30/student. This is only \$0.30 per day. The first half of the program will run Monday, August 29th, 2016 to Friday, January 20th, 2017. The second half will run from Tuesday, January 24th, 2017 through Wednesday, June 7th, 2016. We are not able to give a refund or extra snacks for days students are absent. Due to fluctuations in grocery food costs, any additional balance will be used for student scholarship for the following year.

Please note: This is a convenience program provided by Clover Ridge. It is not part of the school lunch program, or affiliated with District 112 Food Service.

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PLEASE: attach a separate form for each student – You may write one check per family.

Payable to: Clover Ridge Elementary- Snack Cart

Student's Name _____

Parent's Name _____ Phone # _____

Grade _____ Teacher _____ Half year \$30 / Full year \$55

Food allergy? If so, to what? _____

Please fill out form completely and detach at dotted line.

