Grapevine-Colleyville ISD Child Nutrition Program

Note on Meal Account Form

MEAL RESTRICTIONS

Restrictions may be placed on your child's meal account, please complete this form and return it to the cafeteria manager. This form does not need to be completed if no restrictions are required. Forms will be kept on file for each school year. Please complete one form per child.

FOOD ALLERGIES

Food allergies that result in severe, life-threatening (anaphylactic) reactions are considered a disability and an appropriate prescribed food substitution will be made with a licensed physician's assessment.
All other food allergies, intolerances, and preferences not considered life-threatening are not identified as a disability under either Section 504 of the Rehabilitation Act or Part B of IDEA. The Child Nutrition department may make food substitutions, at their discretion, for individual children who do not have a disability but who are medically certified as having a special medical or dietary need. A medical statement must be submitted and decisions will be made on a case-by-case basis.

(Texas Department of Agriculture, August 2023)

School _____

Name of student _____

Parent/Guardian _____ Email Address _____

Phone number _____ Date _____

MEAL COMPONENTS, EXTRAS, BEVERAGES AND SNACKS

Elementary tray items are categorized as meal components, extras, beverages or snacks. Meal components include single servings of fluid milk, meat or meat alternatives, grains, vegetables and fruits (please see the Reimbursable Meals section on the About School Lunches page for more details about these meal components). Any additional servings of meal components are considered extras. Beverages include bottled water and 100% juices. Snacks include a variety of baked chips, mini ice cream treats, cookies, etc.

ITEM RESTRICTION

If you would like to restrict the purchase of specific items, check the appropriate box:

- ❑ Tray Only – This will prevent your child from purchasing, extras, snacks and beverages.
- ❑ No Beverages/Extras OK – This will allow your child to purchase extra entrees and sides from the tray line but will restrict them from purchasing beverages.
- ❑ No Snacks/Extras OK – This will allow your child to purchase extra entrees and sides from the tray line but will restrict them from purchasing snacks.
- ❑ Snack on M T W Th F Only – Circle the day(s) of the week you wish to allow the purchase of snacks.
- ❑ Food Allergy – Food Allergies – Please list what foods your child is allergic to:_____
  In order to make a food substitution a doctor's note must be submitted along with the Parent Statement of Food Allergy form available in the student enrollment packet. This form is also available through the GCISD Health Services Department.

  Other _____

A note on meal account may be emailed to child.nutrition@gcisd.net. Please include above information in the email.