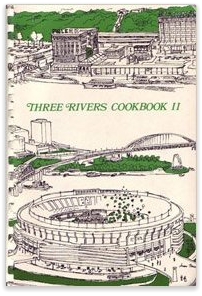
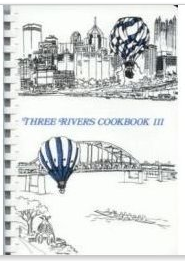
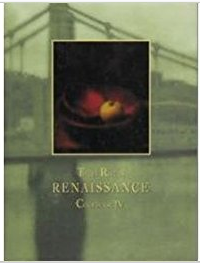
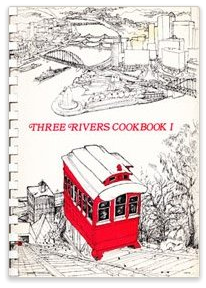
Be a part of the tradition!!

**The Child Health Association of Sewickley**

is delighted to accept your recipe for consideration for

**Three Rivers Cookbook V**



Please complete all fields on the submission form. When you finish entering your information, please save the file using your recipe name as the file name. Email your recipe to [beckyfallgren@gmail.com](mailto:beckyfallgren@gmail.com) ; [nancy@tpgusa.org](mailto:nancy@tpgusa.org) ; [mmarks@mcclain-group.com](mailto:mmarks@mcclain-group.com)

|  |  |
| --- | --- |
| **Recipe Name:** | Click or tap here to enter text. |
| **Submitted by:** | Click or tap here to enter text. |

**Recipe Category – Please select the appropriate box below for your submission (click on box)**

**Section 1: We Love Kids! - Healthy recipes for kids.** Please check one box.

|  |
| --- |
| Snacks |
| Lunchbox choices |
| Easy weeknight family dinner recipes |

**Section 3: Member Favorites - Our very best recipes.** Please check one box**.**

|  |  |  |
| --- | --- | --- |
| Appetizer | Soup | Salad |
| Breads | Pasta | Main Course |
| Meat-Free Main Course | Vegetable | Side Dishes |
| Cheese Course0 | Dessert | Other: |

**General information:**

|  |  |
| --- | --- |
| Prep time (minutes or hours): |  |
| Cook time (minutes or hours): |  |
| Number of servings: |  |
| Will it freeze? |  |
| Can you make it in advance? |  |
| **Are there seasonal items that make this recipe work better at a specific time of year?** If so, please give general timeframe (ex: pumpkin = fall) | |
| Click or tap here to enter text. | |
| **Ease of preparation:** Remember… degree of difficulty should be based on the skill level of the average cook. Include additional comments such as “lots of chopping, but it is worth it” | |
|  | |

**Allergens:** Please check all that apply to your recipe.

|  |  |  |
| --- | --- | --- |
| Peanuts | Tree nuts | Eggs |
| Wheat | Soy | Milk |
| Fish | Shellfish |  |

**Ingredients.** Be sure to tell us the quantity and unit of measure for each item. The text box will grow as you add items.

|  |
| --- |
|  |

**Directions:** Please remember to include each step, along with temperatures and cooking times.

|  |
| --- |
|  |

\*\* Please note that all recipes are subjected to blind taste testing prior to being accepted into our publication. We thank you for your submission but we must let you know that not all recipes are selected.