

TRY NEW FOODS!

Try twelve new foods from any group and return to your Hy-Vee dietitian for a prize!

VEGETABLES	FRUIT	PROTEIN	GRAINS	DAIRY
<input type="checkbox"/> Asparagus <input type="checkbox"/> Avocados <input type="checkbox"/> Broccoli <input type="checkbox"/> Brussel Sprouts <input type="checkbox"/> Butternut Squash <input type="checkbox"/> Carrots <input type="checkbox"/> Cauliflower <input type="checkbox"/> Celery <input type="checkbox"/> Cabbage <input type="checkbox"/> Cucumbers <input type="checkbox"/> Green beans <input type="checkbox"/> Jicama <input type="checkbox"/> Lettuce <input type="checkbox"/> Mushrooms <input type="checkbox"/> Peppers <input type="checkbox"/> Squash <input type="checkbox"/> Tomatoes <input type="checkbox"/> _____ <input type="checkbox"/> _____	<input type="checkbox"/> Apricots <input type="checkbox"/> Bananas <input type="checkbox"/> Blackberries <input type="checkbox"/> Blueberries <input type="checkbox"/> Cantaloupe <input type="checkbox"/> Cherries <input type="checkbox"/> Honeydew <input type="checkbox"/> Kiwi <input type="checkbox"/> Mangoes <input type="checkbox"/> Nectarines <input type="checkbox"/> Peaches <input type="checkbox"/> Pineapple <input type="checkbox"/> Pomegranate <input type="checkbox"/> Raspberries <input type="checkbox"/> Strawberries <input type="checkbox"/> Tangerines <input type="checkbox"/> Watermelon <input type="checkbox"/> _____ <input type="checkbox"/> _____	<input type="checkbox"/> Almond Butter <input type="checkbox"/> Almonds <input type="checkbox"/> Beans <input type="checkbox"/> Beef <input type="checkbox"/> Cashews <input type="checkbox"/> Chia Seeds <input type="checkbox"/> Chicken <input type="checkbox"/> Edamame <input type="checkbox"/> Fish <input type="checkbox"/> Hummus <input type="checkbox"/> Peanut Butter <input type="checkbox"/> Pumpkin Seeds <input type="checkbox"/> Sesame Seeds <input type="checkbox"/> Sunflower Seeds <input type="checkbox"/> Tofu <input type="checkbox"/> Veggie Burgers <input type="checkbox"/> Walnuts <input type="checkbox"/> _____ <input type="checkbox"/> _____	<input type="checkbox"/> Barley <input type="checkbox"/> Brown rice <input type="checkbox"/> Buckwheat <input type="checkbox"/> Bulgur <input type="checkbox"/> Millet <input type="checkbox"/> Oatmeal <input type="checkbox"/> Quinoa <input type="checkbox"/> Rolled oats <input type="checkbox"/> Rye <input type="checkbox"/> Sorghum <input type="checkbox"/> Triticale <input type="checkbox"/> Whole wheat <input type="checkbox"/> Wild rice <input type="checkbox"/> _____ <input type="checkbox"/> _____	<input type="checkbox"/> Cottage Cheese <input type="checkbox"/> Kefir <input type="checkbox"/> Rice Milk <input type="checkbox"/> Ricotta Cheese <input type="checkbox"/> Soymilk <input type="checkbox"/> Soy Yogurt <input type="checkbox"/> Yogurt (Fat-Free, Low Fat, Reduced Fat, Whole Milk) <input type="checkbox"/> _____ <input type="checkbox"/> _____

