



**Dietary Needs**

Complete and sign this form only if food allergies/special diet is required.

Student Name \_\_\_\_\_

Name of School \_\_\_\_\_ Date of Camp \_\_\_\_\_

In an attempt to accommodate the dietary needs of all guests, please complete this form in detail. While we will do our best to accommodate your needs, it does not mean that all dietary requirements can be met and there may be a need for parents or guests to provide special meals and snacks for the length of the stay. This form must be submitted at least one week prior to check in. If this form is submitted after this deadline, we may not be able to accommodate the student's special dietary needs, and the student's parents/guardians must provide any special diet required.

**Does your student have allergies to any of the following?**

Gluten/Wheat / Soy / Tree nuts / Shellfish / Peanut / Milk / Fish / Eggs / Fruit / Dairy / Other

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**If you checked any of the above, please explain in detail**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Does your child require a special type of diet, for example, high fat, vegetarian, or diabetic? Please explain.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parent Signature \_\_\_\_\_

Date \_\_\_\_\_ Parent Name (please print) \_\_\_\_\_

Parent Phone \_\_\_\_\_ Parent Email \_\_\_\_\_