## **FOOD ALLERGY FORM**

## Due by 3 weeks before arrival

| Group Name                                 |          |           |           |          |           | Dates of Stay  |   |          |                |               |          |  |
|--|----------|-----------|-----------|----------|-----------|--|---|----------|----------------|---------------|----------|--|
| Camper Name                                |          |           |           |          |           | Camper Age   |   |          |                |               |          |  |
| Guardian if ur                             | nder 1   | 8 years   | old       |          |           |  |   |          |                |               |          |  |
| Phone Number                               | er       |           |           |          |           | Email  | Email   |          |                |               |          |  |
| Special Diets                              |          |           |           |          |           |  |   |          |                |               |          |  |
| Food allergies a<br>we have a list o       |          |           |           |          |           | se we must place<br>rival.                                     | our food  | order in | advanc         | e, it is vita | al that  |  |
| have allergies t                           | hat re   | quire spe | ecial cod | oking ne | eds where | free. If you require<br>cross contaminati<br>heat your food an | on could  | be a fac | tor, we        | ask you t     | o bring  |  |
| Our breakfast ir<br>Both lunch and         |          |           |           |          |           | cereals and usuall<br>the entree.                              | y a break   | fast mea | nt and e       | ggs.          |          |  |
| For those wishin of \$6 per meal           |          |           |           |          |           | p and prepare gloarian meals.                                  | uten free   | meals fo | r an add       | ditional c    | harge    |  |
|  |          |           |           |          |           | 5 with 5 being the camper caries a                             |   |          | e allergie     | es.           |          |  |
| Milk (lactose)                             | 1        | 2         | 3         | 4        | 5         | Nuts   | 1   | 2        | 3              | 4             | 5        |  |
| Eggs                                       | 1        | 2         | 3         | 4        | <br>5     | Gluten   | 1   | 2        | 3              | 4             | <br>5    |  |
| Soy  | 1        | 2         | 3         | 4        | <br>5     | Other  | 1   | 2        | 3              | 4             | 5        |  |
| Additional note                            | es       |           |           |          |           |  |   |          |                |               | <u> </u> |  |
| I am bringing                              | my o     | wn pre-   | made e    | entrees  | hat can b | e stored and he  | ated by   | the kitc | <b>hen</b> Yes | sNo           | )        |  |
| Camp Oakhu                                 | rst Kito | chen to   | provide   | e these  | meals     |  |   |          |                |               |          |  |
| Vegetarian Meals Yes No<br>No extra charge |          |           |           |          |           |  | Gluten Free Meals Yes No<br>Breakfasts Lunches Dinners<br>Total meals x \$6 = |          |                |               |          |  |
| Camper or Guardian signature               |          |           |           |          |           | <br>Date   |   |          |                |               |          |  |