Dietary Needs on a Field Trip

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

Student Name ___________________________________________  Grade ______________________

Field Trip _______________________________________________  Date(s) ______________________

In an attempt to accommodate the dietary needs of your child, please complete this form in detail.

While we will do our best to communicate these needs to the relevant facility, it does not mean that all dietary requirements can be met and there may be a need for parents to provide special meals and snacks for the length of the stay.

Does your student have allergies to any of the following:

- Gluten/Wheat
- Soy
- Tree nuts
- Shellfish
- Peanut
- Milk
- Fish
- Eggs
- Fruit
- Other dairy ______________

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

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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 _______________________________________

Revised 6/21/2017