



Dietary Restrictions Form

Group Information

County Name _____

Camper Information

Camper Name _____

Parent Name _____

Phone Number _____

Dietary Restriction

Type of Allergy _____

Type of Food Avoidance _____

Lactose Intolerant _____ Diabetic _____

Vegetarian _____

If your child has a dairy intolerance, are they able to have cooked dairy? YES/NO

If your child has religious food restrictions, we will not be able to accommodate their meals. Please make sure that your child has food to replace the food items that they are unable to eat while at camp.

If your child is a picky eater and you believe that they will not eat certain meals please provide your county with a meal replacement.

If your child has dietary restrictions, please make sure that you fill the form out and return to your county Educator. We will not be able to provide any special dietary meals to your child without the form.

If you have any questions and need to speak to someone about dietary concerns while at 4-H Camp Ohio please contact Heather Swihart-Rine @ 740-616-6187 or kitchencamp6@gmail.com