Food Allergy and Religious Dietary Information Form

The Food Services Program Area at Hawk Mountain Scout Reservation is committed to insuring that your Scout has the best meals that we can provide. We understand that many children are allergic to foods that we use every day in the kitchen or that they may follow dietary guidelines of their religion.

If your Scout has any allergies to food or follows dietary guidelines of their religion, please complete the form below. This form is very important to the Food Services Program Area. In order for your Scout to have adequate food, we need to be aware of any dietary needs. It is also very important for us to know if the Scout has a severe allergy, so that we may do everything that we are able to ensure the Scout does not come in contact with that particular food. Please take the time to answer the few questions below.

You also have the option of providing your Scout's meals. If this is chosen, the meal costs ($3, Breakfast; $5, Lunch; $7; Dinner) will be deducted from the camper fee.

Sign and return the form no later than two weeks prior to your Scout's camping week. *Forms given on Sunday of that week of camp will be accepted but provisions may not be available. This form is required in advance so food can be purchased to assist the needs of the Scout.* Mail the form to Hawk Mountain Council, ATTN: Food Services Program Area, 5027 Pottsville Pike, Reading, PA 19605.

NAME: _____ TROOP/PACK: _____

Date/Week attending camp: _____

Food Allergies: YES NO (Please check one)

What are they: _____

How severe is the Allergy: MODERATE STRONG SEVERE (Please choose one)

Any other information we need to know? _____

_____

Religious Needs: YES NO (Please circle one)

What can we do to help? _____

_____

I choose / do not chose (Please choose one) to provide meals for my Scout. (If you chose to provide meals for your Scout, please contact David Muldowney at 570.581.3116 for reduced camper fee pricing.)

Parent/Guardian Signature _____ Date _____
Phone Number _____ E-mail _____