

Special Diet Request Form

This form is to be used ONLY for necessary special diets due to MEDICAL or RELIGIOUS restrictions. You will be notified prior to camp if we are unable to accommodate your request. Thank you!

Name: _____

Phone Number: _____

School Name: _____

Date of Camp (MM/DD/YY): _____ - _____

FOOD RESTRICTIONS: (Please check all that apply)

- | | | |
|--|---|--|
| <input type="checkbox"/> Diabetic | <input type="checkbox"/> No Salt | <input type="checkbox"/> No Corn Product |
| <input type="checkbox"/> No Preservatives | <input type="checkbox"/> No Wheat Product | <input type="checkbox"/> No Pork |
| <input type="checkbox"/> Vegetarian | <input type="checkbox"/> Nut Allergies | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Chicken/Fish Only | <input type="checkbox"/> Vegan | _____ |

What type of foods do you eat at home?

PLEASE NOTE: This form is NOT for those with merely diet preferences. Unfortunately, we cannot accommodate the wide variety of individual preferences at camp. Our Camp kitchens work hard to provide delicious and nutritious meals in ample quantities for all campers. Please contact Guest Services if you feel you have a unique situation requiring special consideration. Thank you for your understanding.

It is ideal if you can bring specialty food from home. We will try to supplement with items from our kitchen. Some of our menu items, however, can be prepared for your needs depending on your diet. If we are not able to accommodate your diet from our kitchen, we will notify you before you arrive

Please duplicate this form if you have more than one camper with special dietary needs

**Mail or Fax this form to Old Oak Ranch Educational Programs
ONE MONTH prior to your stay**

Please call or email us to confirm that we have received your special diet request(s)

Old Oak Ranch Educational Programs

15250 Old Oak Ranch Rd.

Sonora, CA 95370

PHONE: (209) 532-4295 FAX: (209) 532-8345

www.oldoak.com