

2022 SUMMER RESIDENT CAMP – SPECIAL DIETARY NEEDS FORM

Use this form to notify the camp of any special dietary needs, food restrictions or allergies. Camp Marin-Sierra will make every reasonable effort to accommodate the special needs reported below. Be specific in explaining the dietary needs, food preparation requirements or allergic reactions. This form is not for dietary preferences (i.e. does not like peas.)

Week (check one): #1/July 3-9 #2/July 10-16 #3/July 17-23 #4/July 24-30

Youth Adult Troop # _____ Council Name (not District) _____

Individual Name: _____ Best Phone # _____

Email Address: _____ Alternate Phone # _____

Please print clearly, and indicate an email that is checked frequently.

Troop Representative Name: _____ Best Phone # _____

Contact name of individual responsible for all Summer Camp correspondence for your unit.

Email Address: _____ Alternate Phone # _____

Please print clearly, and indicate an email that is checked frequently.

PROCEDURE:

- 1) **Do not submit this form if you have NO special dietary needs or restrictions.**
- 2) **Submit this form no later than two weeks prior to your arrival at Summer Camp.** Email, Fax or Mail to the address information at the bottom of this page. Your form will be forwarded to the Commissary staff.
- 3) **Provide your Troop leader with a copy to be brought to camp and presented with the medical forms.**
- 4) **You must confirm** with the Commissary Director, Food Services Manager, or Special Dietary Needs cook at each meal to make sure you get what you need. We are preparing food 3-times a day for as many as 400 people in camp during any given week; filing this form does not guarantee that you will receive the correct foods unless you meet in-person with those Commissary Staff individuals noted above.
- 5) In the event you believe that you may have received the incorrect type of food, do not hesitate to contact any one of the Commissary Staff individuals noted above in #4. If you ingest something to which you are allergic, please see the Camp Health Officer immediately or have a staff member radio them for emergency response!
- 6) It is the responsibility of those persons with severe allergies to make sure they always carry the proper medication (such as an Epi-pen) with them at all times in case of emergency.

DESCRIPTION: (please be very specific about what you cannot eat, or type of diet needed, or allergic reactions)

Return by US Mail: Marin-Sierra / 225 West End Avenue / San Rafael, CA 94901 **or Fax:** 415-454-5511

Phone: 415-454-1081

Email: camping@boyscouts-marin.org

Website: www.boyscouts-marin.org