



DIETARY SPECIAL NEEDS AND RESTRICTIONS; MEDICATION REMINDERS

We need your help in understanding and planning for any dietary needs or restrictions you might have on the upcoming Cursillo weekend. We need to know about allergies and restrictions (not preferences).

Name _____

Medication

- I take medication and would like to be reminded when I need to take it. (We will contact you)
- I take medication and do not need to be reminded when I need to take it.
- I do not take any medications

Dietary Needs

- I have no dietary restrictions

I require a:

- Dairy free diet I can have goat or sheep dairy
- Gluten free diet (no wheat, rye or barley products)
- Nut free diet Specific nut allergy _____

I have other food allergies/sensitivities (NOT preferences). Please list:

What reaction(s) do you have if you accidentally ingested an allergen?

What action needs to be taken in this event? Epi-pen, Benadryl, something else?

- I am Vegan. I will not eat the following under any circumstances:

Eggs Dairy Other _____

- I am Vegetarian. I will eat:

Eggs Dairy Fish Other _____

- I am diabetic.

I take medication (circle) Oral Insulin

I am good about self-regulating my condition and foods.

Please List foods that will help properly maintain your sugar levels:
