

COMPLETE THIS FORM IF YOU HAVE SPECIAL DIETARY REQUIREMENTS AND EMAIL BACK TO CONTACT PERSON BY 12/3/19



YMCA Camping

Special Dietary / Medical Requirements Summary

GROUP NAME:	ORIENTEERING QUEENSLAND
CONTACT PERSON:	LINDA BURRIDGE admin@oq.asn.au
CAMP DATES:	15 /03 / 2019 to 17 /03 / 2019

SPECIAL DIETS (please identify diet type and severity for each person and record in table below):

LEGEND:				SEVERITY OF CONDITION:		
1 - Gluten Free	3 - Vegetarian	5 - Vegan	7 - Nut Free	1 - Don't like it	3 - Will have non-life threatening reaction when eaten / in contact.	5 - Chance of death if in contact.
2 - Dairy Free	4 - Soy/Egg Free	6 - Allergy	8 - Diabetic/Other	2 - Can have products that 'may contain traces'	4 - Has EpiPen	

PLEASE NOTE: If you need clarification on menu ingredients please contact YMCA Camping on (07) 4661 9575. It is recommended people with special dietary requirements bring additional snacks with them to camp as a back-up.

ATTENDEE DETAILS (please list all attendees with special dietary requirements and/or recent medical conditions):

FIRST NAME	SURNAME	DIETARY TYPE	SEVERITY	NOTES eg: If diabetic state high or low	MEDICAL ISSUES Recent issues: broken limbs, current allergies, ailments, asthma etc.

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