

Mount Rainier Institute

Participant Dietary Restrictions

Complete this form ONLY if you as a participant or your child has a dietary restriction.



At Mount Rainier Institute, we strive to accommodate special dietary needs to the greatest extent possible. Please list dietary needs or restrictions on the permission slip and on this form. Include food allergies, reactions to food and the appropriate treatment to be used. Also list any vegetarian requirements, religious restrictions, etc.

If the restriction is for a medical reason, please be very specific in describing the extent of the restriction. For example, if the participant is allergic to eggs, is it just eggs as a dish (such as scrambled eggs) or does it include casseroles, breads, cakes, etc. that include eggs in the recipe? If the participant take medication for the food allergy, can the food be eaten as long as the medication is take? The more information we have, the better we can meet your needs.

Food is ordered a week in advance of your visit to Mount Rainier Institute. In order to accommodate your needs. **WE MUST RECEIVE THIS FORM AT LEAST 2 WEEKS BEFORE YOUR ARRIVAL DATE.** Please also note any restrictions on the health form that is returned to the teacher.

If you have concerns about your child's diet, please feel free to discuss the situation with the Mount Rainier Institute's food service department at (253)692-4161.

Participant Name: _____ School: _____

Dates of Attendance: _____

Please List any dietary restrictions here:

If the participant listed on this form is allergic to nuts please check the appropriate boxes below:

Reaction occurs if nuts are:

- Ingested
- Inhaled
- Touched

This participant **MAY** eat products that:

- Are produced in the same factory as nut products so long as there are no nuts listed in the ingredients list.

Would you like to be contacted by our executive chef? Yes No If yes, please provide the following:

Name: _____ Daytime phone: _____ Evening Phone: _____

Email: _____

Please email, fax, or mail this form to Amy Wilson at the appropriate address found below. This form may be folded, taped, stamped, and placed in the mail.

Fax: (360) 832 -3612

Email: amy13@uw.edu

Phone: 253-692-4168

Fold Here

Place
stamp
here

Mount Rainier Institute
ATTN: Amy Wilson
9010 453rd St East
Eatonville, WA 98328
