

Allergy/ Dietary Restriction Form

Please list the name of the attendant and days participating in the program. Please be very specific on the allergy so we can best serve the attendee of the program.

Example:

Sandy Beach - Vegan/ and soy allergy

Attending the entire program

Kevin Wonder- Dairy, egg, sunflower allergy
present for the rest of the program

Missing Monday lunch will be

Name/allergy/attending meal(s)

Name	Describe Allergy / Issue	Meal(s) Attending

- **Please Note- It is the attendees' responsibility to come to WGC Catering staff at each meal. If the attendee does not do this WGC Catering is not responsible for the attendee not having the proper meal.**
- **WGC Catering can only provide what we are informed about. If an attendee has not notified the hosting group or WGC catering has not been notified, we cannot be prepared properly for the allergen.**

Name of person submitting information _____

Email _____

Ph: _____