

ALLERGY / FOOD PREFERENCE LUNCH CHOICE FORM

CHILD'S NAME		DOB
Does your child have any ALLERG If your child has allergies, please		
PLAN, this form is on our websit Your child cannot be enro	e. https://www.rit.edu/margaretshouse/sites/rit.edu.margar	or to complete the ALLERGY EMERGENCY retshouse/files/2022-08/0%206%20Allergy%20Emergency%20Plan.pdf without the Allergy Emergency Plan entified by you or your child's doctor.
Does your child have any FOOD F		NO
If they have a food restriction, pl FOOD	ease fill out this chart: REASON FOR RESTRICTION	ACTION REQUIRED IF INGESTED
1000	NEA GOTT ON NEED THICK	, to not the domes in integer
Regular lunch Vegetarian lunch – often Special Diet lunch – aller		-
At any time that the provided lur or alternative food/meal for ther	nch is not approved for your child m. If your child's diet requires for	n any lunch that is not a special diet. d, you are required to send in a replacement boods not offered in these 3 choices, you will ds for lunch that are not included in the 3
 Name of Parent/guardian comple	 eting form	 Date