ScoutCon!

SPECIAL DIETARY REQUEST

** *FOOD ALLERGIES* **

This form is for detailed information for meals – and
MUST BE COMPLETED & SENT IN BY
OCTOBER 20, 2023

Return to the Quivira Council Program Executive

Dietary Request must also be indicated on the person's registration in Black Pug.

Please Print or Type

Unit Type: **[ ] Troop** **[ ] Crew** **[ ] Sea Ship**

Unit #: _____ **Council:** _____ **District:** _____

Unit Leader Making Request:_____

Unit Leader's Phone #: (_____) _____

Request Made For (Name of Person): Y or A _____
(Circle)

Type of Food Allergies:

(Please circle the need)

_____

_____

_____

_____

_____

_____

_____

_____

_____

OFFICE USE: Copy to Food Coordinator on _____.

Return to: Quivira Council Program Exceutive/ScoutCon
3247 N. Oliver, Wichita, KS 67220
or Scan and Email: Jo.Irsik@scouting.org