

MA-KA-JA-WAN SCOUT RESERVATION – SPECIAL DIET REQUEST FORM

W6500 Spring Lake Road, Pearson, WI 54462

Northeast Illinois Council, BSA

850 Forest Edge Drive, Vernon Hills, IL 60061

PLEASE PRINT ALL INFORMATION CLEARLY

CAMPING IN (circle one) East Camp West Camp Wabaningo (Trek)

Program: ___ Traditional Camp ___ Provisional Camp ___ High Adventure Trek ___ Provisional High Adventure Trek

Name _____ This is a/an (circle one): Scout Adult

Troop or Crew # _____ Dates of Arrival & Departure _____

Name of Parent/Legal Guardian (If a Youth) _____

Parent/Adult's: Daytime Phone _____ Evening Phone _____

Parent/Adult's Email Address _____

Allergies and special diets are a common concern of our campers. Our food service providers are very experienced with accommodating most diets, including food allergies, religious restrictions, and other health-related diets. We are happy to accommodate any diet with religious, medical or allergy needs. However, this form must be submitted **at least three weeks prior to arrival**. Please complete and submit this form to Jara Bauer, Registered Dietician for Kandle Dining Services at jara@kandledining.com. Fax number: 859.356.4747.

While at camp, your child could be served one of the many dining styles. He or she may participate in family style dining, cafeteria style dining, or self-serve bars. It is the camp's expectation that by sending your child to camp, he or she has the necessary knowledge of their diet and can manage their food choices. Camp cannot guarantee an allergen free environment. Careful consideration needs to be taken for campers with severe allergies, particularly those susceptible to airborne transmission. If your child has a severe allergy or dietary restriction, contact the camp directors to discuss if camp is properly equipped to manage your child's needs. While we work to meet all dietary requirements, food is prepared in an area with milk, eggs, peanut, tree nut, wheat, soy and fish and cross-contamination can occur. In consideration of the Camper's participation at camp, the Camper and Parent/Guardian jointly and severally release, forever discharge, hold harmless, and covenant not to sue, Kandle Dining, or any of their related or affiliated entities (the Ma-Ka-Ja-Wan Parties") with respect to any injury, loss, or damage, to person or property associated with participation in Ma-Ka-Ja-Wan Scout Reservation programs, whether arising from negligence or otherwise (the "Claims"). The Camper and Parent/Guardian jointly and severally indemnify, defend, and hold harmless the Ma-Ka-Ja-Wan Scout Reservation Parties from and against the Claims. The release and indemnity set forth herein shall be unconditional, absolute and interpreted to the fullest and broadest release and indemnity permitted by law.

Upon arrival at camp and prior to their first meal eaten, it is the Camper's and Parent/Guardian's responsibility to identify themselves to our kitchen staff, then cooperate in helping us meet their need(s).

Please identify and describe dietary restrictions in the space below.

Omitted Foods	Acceptable Substitutions

Medically Supervised Diet _____ **Physician's Printed Name** _____

Physician's Signature _____ **Phone No.** _____