

CAMP ACAHELA SPECIAL DIETARY NEEDS FORM



Listed below are the most common types of allergies and dietary needs that would affect your stay here at Camp Acahela. Please fill out this form and return it 2 weeks prior to your arrival to help our staff deliver a better experience for you at camp!

EVERY DIETARY NEED/ALLERGY MUST BE MARKED ON YOUR BSA HEALTH FORM

Name: _____ Adult: ____ Youth: ____ Pack #: _____

Dates Attending Camp: _____

Adult/Guardian Name (if Camper is Youth) : _____

Relationship to camper: _____

Phone Number: _____

☐ Gluten Free

☐ No Dairy

☐ Lactose Free

☐ No Soy

☐ Nut Allergy- Please Specify and explain severity (e.g. Ingesting, Contact, Airborne):

☐ Other: _____

☐ Vegan

☐ Vegetarian

☐ No Pork

☐ No Beef

Please explain what happens when you are exposed to your allergen and what steps should be taken if you are exposed:

Any questions can be directed to Acahela's Camp Director (@ bill.zinky@scouting.org)

Our Camp Director will be contacting you to confirm and discuss your allergy/dietary needs