

# Boys Scouts of America Troop 993

## Dietary Restriction and Food Allergy Statement

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*Please place scout's name*

Has the following dietary restrictions:

Has the following food allergies:

\_\_\_\_\_ My son is aware of these restrictions/allergies and is able to manage his diet on his own.

\_\_\_\_\_ My son requires assistance managing his diet. An adult must oversee his meals to assure that he is not eating the wrong food.

\_\_\_\_\_ Due to my son's restrictions/allergies, I will send food for him to supplement the food being served at the campout.