

Deep Portage Kitchen

2197 Nature Center Drive NW

Hackensack, MN 56452

(218) 682-2325

kitchen@deepportage.org

Dietary Restrictions

If you any have dietary needs or requests, you must fill out this form. One form per person is required. Completed form must be submitted no later than 14 days prior to your visit.

Name _____ Child ____ Adult ____

School/Group Name _____

Date(s) of your visit _____

Contact phone number _____ Contact email address _____

If you have a certain diet or restriction due to cultural, religious, or personal reasons, please list below. (i.e. vegetarian, vegan, no pork and/or beef)

List any food allergies/restrictions and the reaction they have on you (anaphylaxis, nausea, etc.). Use additional sheets if necessary.

1. _____

Reaction(s)

2. _____

Reaction(s)

3. _____

Reaction(s)

Please use the space below to provide us with any information to help us serve you. For instance, if you are lactose or egg intolerant, can you eat foods with these items baked in? Please list and describe foods or meals you can eat. This information will help us determine if we can fulfill your dietary needs. If we cannot provide this service, it is required for you to bring your own prepared meals. In this case, Deep Portage will provide refrigeration, storage, and the use of a microwave for your meals.

Diets can get complicated, please feel free to contact me to discuss your concerns.

Thank you,

Tamie Fairbanks

Food Service Director