

CREATIVE ARTS ALTERNATE DIETARY REQUEST FORM

In order to best accommodate your needs, we must have this form submitted 3 weeks prior to our workshop. *There will be no refunds for this option after July 7<sup>th</sup>, 2011.*

There is a \$34.00 surcharge per week for this accommodation. If you have any questions, please contact **Diane Trapp**, 503-956-6688 or email [masks4you@aol.com](mailto:masks4you@aol.com)

GUEST INFORMATION

YOUR NAME \_\_\_\_\_

EMAIL \_\_\_\_\_

TELEPHONE \_\_\_\_\_

CHECK IN DATE: Sunday \_\_\_\_\_ First Meal \_\_\_\_\_  
Month & date

CHECK OUT DATE: Saturday \_\_\_\_\_ last meal \_\_\_\_\_  
Month & date

COMMUTER?    yes            no

**DIETARY INFORMATION** - Circle one of the following:

Vegetarian    Vegan    No Pork    No Beef    Lactose Intolerant    Gluten intolerant

**Food Allergies:** Please be aware these foods are used in the Menucha kitchen. If your allergy is so severe that this may be a problem, note it here \_\_\_\_\_

\_\_Milk    \_\_Egg    \_\_Peanut    \_\_Tree Nut    \_\_Fish    \_\_Shellfish    \_\_Soy    \_\_Wheat

Other food allergy \_\_\_\_\_

You will be issued a card before your first meal at Menucha. This card will state your dietary needs and must be presented to the kitchen as you pick up each meal.

**RETURN COMPLETED FORM TO : Creative Arts Community, PO Box 4958, Portland Or 97208 or to Diane Trapp's email above.**