**3a - Allergy/Special Dietary Requirements Form**

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| **Name of Child** |  |
| **School** |  |
| **Class** |  |
| **Class Teacher** |  |
| **Parent/Guardian****Address****Telephone****Email** |  |

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| **Allergy/Special Dietary Requirements** | **Symptom** | **Treatment/Action** |
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**Note to Parents/Guardians:**

Special diets will be catered for, provided requests for these are supported by a medical report such as a letter from your GP or hospital consultant.  Requests for special diets should be made directly to LFL with a supporting letter.  A special menu will then be agreed upon between the parent and the Catering Manager.

LFL will do all that it can to minimize risk to children with allergies and special dietary requirements. It operates a nut free kitchen and complies with food allergen labelling legislation. All special dietary requirement meals are cooked and labeled separately to minimize risk. The online ordering system and the LFL website ([www.localfoodlinks.org.uk](http://www.localfoodlinks.org.uk) /Our Food/Allergies) enables Parents/Guardians to see all the ingredients in any meal. LFL can also provide telephone advice and further information about specific dishes, please contact Barry Dovell, Catering Manager, on 01308 428921 or email barry.dovell@localfoodlinks.org.uk.

Please complete this form and attach the medical report. Please sign the declaration below to consent to your child receiving a meal from us. Contact us with any queries.

**I consent to my son/daughter receiving school meals from Local Food Links and I will keep LFL updated about any changes to their dietary requirements. I understand that LFL will keep records in respect of allergies and contact me if the need arises.**

**Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**