

Dietary Needs Form

Dear Guest;

It is our understanding from your registration form, there are some special dietary requirements during your stay at TLC. In an effort to serve you best, could you take a moment and complete the following questions. When completed please return it to the Front Desk or to the Chef in the Kitchen.

Thank you!

1. Please check options that apply to you: _____ Vegetarian _____ Vegan
If Vegetarian, please specify:

_____ Veggies only _____ Eggs ok _____ Fish ok
_____ Dairy ok _____ Chicken ok

If Vegan or vegetarian, please check the following item which you prefer.

_____ Peppers	_____ Beans
_____ Tomatoes	_____ Avocado
_____ Onion	_____ Squash
_____ Garlic	_____ Zucchini
_____ Broccoli	_____ Cabbage
_____ Cauliflower	_____ Carrots
_____ Brussel Sprouts	_____ Pasta
_____ Corn	_____ Rice

2. Please check items which are apply:

Lactose Intolerant _____ Gluten Intolerant _____ Peanut or Tree Nut _____
Collitus _____ Diabetic _____ Other: _____

Please list any food allergies below:

3. If there is any further information you feel the Chef needs to know for meal planning or preparation, please make note if it here.

Guest Name: _____

Group Name: _____