



In order to make our guests as comfortable as possible we ask that you fill out the following information about any participants in your group who may have special dietary needs. **We can accommodate diabetic, vegetarian and gluten allergies only.** This insures that our kitchen is made aware of any special food requirements and can accommodate accordingly.

Name of Church: _____

Session (Please check one):

_____ Mid-Winter 1 (Jan. 31-Feb. 2, 2020)

_____ Mid-Winter 2 (Feb. 14-16, 2020)

Guest Name:

Type of Dietary Need:

1.) _____

2.) _____

3.) _____

4.) _____

5.) _____

6.) _____

7.) _____

