



## PROVISION OF SPECIAL DIETS FORM

The School Meals Service endeavour to work in partnership with all families to ensure that we can provide specialist diets and menus for all pupils. If your child has an allergy or intolerance to any food, could you please complete the details below and return to the school. **Please include written confirmation from a Dr or Dietician confirming the allergy/intolerance.** Unfortunately, the diet cannot be put in place without this confirmation.

### Nut allergy

Please note all our suppliers are requested to supply nut free products. However, whilst some products can be totally nut-free, suppliers cannot give us a total guarantee that cross-contamination with nuts does not occur during the manufacturing process. We will attempt to minimise the risk in providing a nut-allergy specialised menu, but feel it is necessary for us to draw your attention to the fact that Woodham Academy's School Meals Service is unable to guarantee a 100% nut free school meal for the reason stated above. By signing below you are instructing Woodham Academy to provide your child with a school meal.

**Name of Child:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Allergy/Special Diet:** \_\_\_\_\_

\_\_\_\_\_

**Name of Parent/Guardian:** \_\_\_\_\_

**Parent/Guardian's Address:** \_\_\_\_\_

\_\_\_\_\_

**Parent/Guardian's Telephone Number:**

**Home:** \_\_\_\_\_

**Mobile:** \_\_\_\_\_

**Name of G.P. or Dietician:** \_\_\_\_\_

**Address of G.P. or Dietician:** \_\_\_\_\_

\_\_\_\_\_

**G.P. or Dietician Telephone Number:** \_\_\_\_\_

**Confirmation from G.P or Dietician enclosed** \_\_\_\_\_

**Parent/Guardian's Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_