**FOOD INTOLERANCE FORM**

This form is for people who will be eating in the dining hall. For catering food intolerance please put information on catering request form.

Please complete this and email to sodexo@smus.ca

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Community Status (boarding community, day student, school staff) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Which meals a week do you foresee yourself eating at Brown Hall?

Monday Breakfast Lunch Dinner

Tuesday Breakfast Lunch Dinner

Wednesday Breakfast Lunch Dinner

Thursday Breakfast Lunch Dinner

Friday Breakfast Lunch Dinner

Saturday Brunch Dinner

Sunday Brunch Dinner

 What foods are you not able to consume? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Do you need direction to avoid these foods or can you identify them yourself? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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We will endeavour to ensure the foods on offer do not include any of your foods listed above. If it is unavoidable, there will be a separate entrée available for you. Just make yourself known to the cook on duty.

If you do not plan on attending some of these meals, please do let us know either by email – sodexo@smus.ca or

250-370-6102 to let the cook on duty know. Thanks

