



Medical Diet Request Form

(To be completed by the Guest, not group coordinator)

We are excited that you are coming! We are able to accommodate most medical dietary needs when given prior notification.

- Tilikum prepares family-style meals rather than ‘individual short orders’ based on ‘food preferences’.
- We will make you an individual meal with the specifications listed below to the best of our abilities. **Tilikum charges an additional \$1 per meal per person for “Medical Diet” requests due to additional preparation and higher cost of food.**
- *We are not a dedicated facility* and process all types of foods in the same kitchen.
- Guests are encouraged to bring supplemental snacks or foods, when faced with a restrictive diet. You may keep these items in our guest mini-refrigerator or bring your own ice chest and we’ll supply you with ice.
- All guests assume personal responsibility for their dietary needs and communication of those needs. Please ask the Guest Host serving you if there are any ingredients that are unsafe for you, BEFORE eating your meal.

Please return this form to your Group Leader who will forward it to us (if not received two weeks prior to arrival, we cannot guarantee accommodations). Please pay your group coordinator.

****Please PRINT Clearly****

Guest Name: _____

Group Name: _____

Guest Home Phone: _____ Guest Mobile Phone: _____

Guest Email: _____

To better serve you, please share with us when you’ll be here.

Arriving Date: _____ Breakfast Lunch Dinner

Departing Date: _____ Breakfast Lunch Dinner

It is important for us to know what you are able to eat and enjoy eating with your restrictions.

Vegetarian, but I do eat (circle if applicable): Chicken, Turkey, Fish, Eggs _____

Vegan, but I do eat (circle if applicable): cheese, eggs, butter or items that contain these cooked ingredients _____

Gluten free, but I do eat: _____

Dairy Free, but do eat (circle if applicable): items cooked with butter, milk _____

We are able to accommodate the following medical diets (please select):

- | | | |
|-----------------------------------|-------------------------------------|--|
| <input type="checkbox"/> No Sugar | <input type="checkbox"/> No Peanuts | <input type="checkbox"/> No Tree Nuts |
| <input type="checkbox"/> No Pork | <input type="checkbox"/> No Beef | <input type="checkbox"/> Pescatarian (eat fish, no other meat) |
| <input type="checkbox"/> No Eggs | <input type="checkbox"/> No Soy | <input type="checkbox"/> Other: _____ |



Camp Tilikum
 15321 NE North Valley Road, Newberg, OR 97132
 Phone: (503) 538-2763 ext. 101 Fax: (503) 538-7536
 Email: michelle@camptilikum.org Web: www.camptilikum.org

