

# Camp Pioneer

## Dietary Needs Form

In order to serve you better, we are asking that you complete this form if you have any special dietary needs either for health reasons or for religious reasons. We will attempt to accommodate your needs from within our resources.

**Name:** \_\_\_\_\_

**Troop:** \_\_\_\_\_

**Site:** \_\_\_\_\_

**Patrol:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Please list below anything you cannot eat.

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