



Special Diet Menu Request Form

We are committed to provide meals for our children requiring a special diet menus. It is very important that this form is accompanied with medical evidence from your child’s medical professional (Consultant or Dietician). This is typically the child’s allergy action plan or care plan.

Please be advised that it may take up to 3 working weeks to complete a menu after the medical evidence has been received and confirmed with our nutrition team.

This form is to be completed by the parent or guardian and sent back to The Pantry Nutrition Team (with medical evidence) on nutrition@thepantrycatering.co.uk.

Pupil name: _____

School name: _____

Year group: _____

Allergies: (Please tick)

Celery		Mustard	
Cereals containing gluten (such as barley and oats)		Peanuts	
crustaceans (such as prawns, crabs and lobsters)		Tree nuts	
Eggs		Sesame	
Fish		Soybeans	
Milk		Sulphur dioxide and sulphites	
Molluscs (such as mussels and oysters)		Lupin	

Other allergies or diet related medical conditions:

Dietary preferences (i.e. vegan or does not eat pork etc): _____

Parent/Guardian name: _____

Contact number: _____

Email address: _____

Parent/Guardian Signature: _____

Date: ___/___/___

If your child’s allergies or medical conditions change, please ensure that you contact The Pantry.

All information will be kept strictly confidential in accordance to the Data Protection Act and only shared with your child’s school.