



NATIONAL YOUTH LEADERSHIP TRAINING

Special Dietary Requests

W. D. BOYCE COUNCIL | BOY SCOUTS OF AMERICA

Please fill out the following form in order for our Quartermasters to accommodate any special dietary needs. Please be as specific as possible.

Participant Name: _____

Food Allergies: (Be specific – i.e. allergic to peanuts and food prepared around them)

Special Dietary Needs: (Be Specific – i.e. vegetarian, vegan, kosher, religious needs, etc.)
