

**Individual Food Form**

**Please return this form to your trip leader by** **(date) at:** **(email).**

[Trip leaders: Use this form to compile totals to include in your Food Planning Form; do not send individual forms to us except for individuals with special dietary needs that are not addressed with your menu choices or those with food allergies].

**Your Name:\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_ Phone Number:\_\_\_\_\_\_**

**Food Details**

1. **Are you a heavy or light eater? Portions will be adjusted accordingly.**

|  |  |  |
| --- | --- | --- |
| **Breakfast**  Heavy  Average  Light | **Lunch**  Heavy  Average  Light | **Dinner**  Heavy  Average  Light |

1. **Do you like Spicy Food?**

**Yes**  **No**

**Drinks**

1. **Which of the following do you drink?**

|  |  |  |
| --- | --- | --- |
| Juice (Assorted) | Assorted Black Teas | Powdered Gator-Aid |
| Hot Chocolate | Assorted Herbal Teas | Powdered Lemonade |
| Milk | Green Tea | Almond Milk |
| Coffee |  | Soy Milk |

1. **What do you add to your breakfast/ hot drinks?**

|  |  |
| --- | --- |
| Sugar: | Evaporated Milk: |
| Milk: | Soy Milk: |
| Half-n-Half: | Almond Milk: |
| Powdered Creamer: | Honey: |
| Equal/Sweet-n-Low: | Other: |
| Flavored Non-Dairy Creamers: |  |

**Allergies/Special Dietary Needs**

[Trip Leaders: If any of the items below are checked for special dietary needs or allergies, please forward the complete details to Moenkopi in the Compiled food form.]

1. **Do you have any special dietary needs? Check any that apply & complete the corresponding items for each.**

**Vegetarian** – If yes, select which items you **will** eat or what substitutions you prefer:

|  |  |
| --- | --- |
| Fish: | Seafood (shrimp): |
| Tofu: | Tempeh: |
| Veggie burgers: | Breakfast meat alternatives (priced on product): |
| Meals w/ chicken broth/bouillon: |  |
| Other substitutions requested: | |

**Vegan** – If yes, select which items you **will** eat or what substitutions you prefer:

|  |  |
| --- | --- |
| Tofu: | Tempeh: |
| Veggie burgers: | Breakfast meat alternatives (priced on product): |
| Soy-based products: | Vegan cheese (priced on product): |
| Other substitutions requested: | |

**Gluten Intolerant** – If yes, tell us what gluten-free specialty items you eat and if you have strong brand preferences:

**Lactose Intolerant** – Substitutions requested:

**Other:**  – Substitutions requested:

1. **Do you have any known food allergies?**  **No**  **Yes\*\***

[\*\*Moenkopi will do their best to accommodate allergies however you are ultimately responsible for taking necessary precautions to guard against an allergic reaction. Please differentiate between a general intolerance for a particular food above and a diagnosed or life-threatening allergy.]

What is your food allergy?

What accommodations do you need to guard against a severe allergic reaction?