

SPECIAL NEEDS REQUEST

Email as an Attachment to amyjo.haywood@scouting.org by May 1.

COUNCIL CAMP NAME: _____ UNIT CONTACT NAME: _____

CONTACT PHONE # _____ EMAIL ADDRESS : _____

UNIT # _____ CAMPSITE # _____ SESSION # _____

Please CHECK if your Troop requires any of the following:

- Early Arrival DATE /APPROX TIME: _____
- ADA Campsite REASON: _____
- Electricity for Medical Device REASON: _____
- Authorization for Vehicle in Camp REASON: _____
- Religious Requests REASON: _____
- Specify Need NEED/REASON: _____
- Specify Need NEED/REASON: _____
- Specify Need NEED/REASON: _____

FOOD ALLERGY NOTIFICATION

Email as an Attachment to amyjo.haywood@scouting.org no later than 2 weeks prior to arrival.

Please submit one form for each participant with dietary allergies.

CAMPER NAME: _____ CAMPSITE #: _____ SESSION # _____

The Grand Canyon Council is committed to serving all participants; however, please understand that some severe allergies may require the participant to bring supplemental food items.

I am allergic to the following items or ingredients:	Trigger: Oral, Physical, Airborne:	Describe reaction:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Those with food allergy concerns should consult the website to review the menu and allergen information. Please contact the Camp Food Services Manager via email if you have questions. Contact information will be on the camp website after April 1.