

## **Special Diet Registration Form**

At South Nest Norse, our menus adhere strictly to the School Food Standards and we endeavour to cater to the majority of the school population. We are aware that not everyone is able to eat all foods **safely**. If a child has a medically diagnosed allergy or intolerance or health condition, we can work with parents/guardians and health professionals to develop an individual menu for that child. In order for South Nest Norse to provide a special diet menu for a child, parents/guardians should complete this in full.

<u>Please note</u>: We cannot provide a menu without supporting evidence from a member of your child's health care team. If you have a recent letter written to you from your child's consultant, a dietitian or other health professional please send this with this request form to address below.

<u>Please note</u> you will not need a GP/health professional signature if this evidence is provided. Otherwise, please seek advice from your school nurse, who can speak to your GP if necessary.

| School Details:  |           |                 |
|--|-----------|-----------------|
| School:  | Post Code |                 |
|  |           |                 |
| Telephone:   |           |                 |
|  |           |                 |
| Child's Details -  |           |                 |
| Cilia 3 Details -  |           |                 |
| Full Name  |           | Date of Birth// |
|  |           |                 |
| Parent/Guardian Contact  |           |                 |
|  |           |                 |
| Name   |           |                 |
|  |           |                 |
| Home Telephone Mobile:   |           |                 |
| Funcil Adduses   |           |                 |
| Email Address  |           |                 |
| Home Address   |           |                 |
| Trome radicessimination  |           |                 |
| Please supply a current photograph of the child and give to the school or caterer. |           |                 |

Please complete both sides and send by post or email to the address below. Please allow two working weeks for the menu to be arranged and in the meantime continue to supply a packed lunch from home until a menu is in place.

Please note that on a rare occasion it may not be possible for South West Norse to provide a special diet safely and may ask parents to provide a packed lunch on all or some days. This decision is not taken lightly and usually occurs when a child has a very restricted diet or medical condition, coupled with the limitations of catering for large numbers in a school. In these circumstances, we feel the parent is best placed to provide food at lunch to ensure a balanced diet is provided for that child safely.

South West Norse Ltd Venture House, 1 Capital Court Bittern Road Sowton Industrial Estate Exeter Devon

**EX2 7FW** or via email to: catering@swnorse.co.uk



## **Menu Planning**

This menu will be planned around eliminating the reported allergen/s. The menu will be nutritionally balanced where possible and as close to the standard menu as the diet will allow. The South West Norse kitchens are nut free environments and we take every precaution to eliminate cross contamination with all allergens. However, we cannot guarantee 100% allergen free.

| Please ring or indicate:   |                                     |  |  |
|--|-------------------------------------|--|--|
| Lunch required all week: Yes / No  |                                     |  |  |
| If no state occasions when not required:   |                                     |  |  |
|  |                                     |  |  |
|  |                                     |  |  |
| MENU REQUIREMENTS  |                                     |  |  |
| Please indicate the Food (triggers) to be exc  | cluded from the menu:               |  |  |
|  |                                     |  |  |
| Gluten   | Wheat                               |  |  |
| Dairy  | Eggs                                |  |  |
| Fish   | Soya                                |  |  |
| Other foods:   |                                     |  |  |
|  |                                     |  |  |
|  |                                     |  |  |
|  |                                     |  |  |
|  |                                     |  |  |
|  |                                     |  |  |
| Please give brief description of symptoms:   |                                     |  |  |
|  |                                     |  |  |
|  |                                     |  |  |
|  |                                     |  |  |
| Injectable treatment required in an emergency: Yes / No  |                                     |  |  |
| Care Plan in Place: Yes / No   |                                     |  |  |
|  |                                     |  |  |
| Parents/Guardians signature and GP or oth  | er Health Professional (**Optional) |  |  |
| I can confirm that this child needs to exclude the foods indicated above.  |                                     |  |  |
| This is due to an Intolerance / Allergy / Coeliac disease or other Medical Condition   |                                     |  |  |
|  |                                     |  |  |
| Parent / Guardian Signature  | Print Name                          |  |  |
| **Surgery/Hospital   |                                     |  |  |
| Surgery/1103pital  |                                     |  |  |
| **GP/HP Signature Print Name   |                                     |  |  |
|  |                                     |  |  |
| Norse Rep  |                                     |  |  |
|  |                                     |  |  |
| Form Completion Date ** Must be filled in**  |                                     |  |  |
| Francisco de la companya de la compa |                                     |  |  |
| Form completed on (month & year)   |                                     |  |  |
| This document is confidential and a surrent copy should be kent with the shild's care plan with the latest many. A copy of   |                                     |  |  |

This document is confidential and a current copy should be kept with the child's care plan with the latest menu. A copy of the menu and current photograph will be kept in the school kitchen.