



### FOOD ALLERGY NOTIFICATION FORM

(\*\*Please fill out this form and send to [admin@djglobalwave.com](mailto:admin@djglobalwave.com))

Child Name:	
Parent Name:	
Team Name:	

Age:	
Contact Number:	
Coach:	

Please make note of any allergy your child may have:

Please provide any favourite alternatives your child may prefer to have:

If you child has any food allergies, please provide special instructions as to treatment of a reaction:

**\*Any child that has allergy medication, including epipen, should have it in their possession at all times. Our kitchen is not fully nut free.**

Parent Signature:	
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Date	
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