**Changes to Dietary/Allergy Requests**

**Child’s Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parents/Carers, please inform us of any changes to your child/children’s dietary/allergy requirements below.

This information is used to update our child allergy management plan in nursery. Thank you

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| --- | --- | --- | --- |
| **Current Dietary and or Allergy requirements** | **Please List Any Changes**  (Foods that the children are now allowed to consume) | **Parent Sign & Date** | **Management Sign & date** |
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