

DIETARY REQUIREMENTS FORM

Course Dates	
First Name	
Last Name	
Email	
Contact Numbers	

Please tell us if you have any of the most common food allergies.

Shellfish

Other – please explain

Eggs

Tree nuts

Fish

Soy

Gluten

Peanuts

If your needs are not on this form or if your allergies are severe, please let us know. Complete and email back to: hello@franceslamb.co.nz



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