



ALBAN WOOD PRIMARY SCHOOL AND NURSERY

The Brow, Watford WD25 7NX • Tel 01923 678240 / 678247 • Fax 01923 678256

Mrs Rachel Kirk, Headteacher

Wednesday 9th September 2015

Dear Parents and Carers,

I am writing to you with regards to allergies and dietary requirements as at the beginning of every term we revisit our records to ensure they are correct and to also ensure all staff are aware of any allergies (food or other). In addition to this, Hertfordshire Catering Limited (HCL), who are responsible for providing lunchtime meals takes the responsibility of feeding pupils with special dietary needs very seriously. Wherever possible they try to accommodate specific needs and work closely with school and parents to ensure that all children safely enjoy a healthy, tasty school lunch.

Menus and products that are used by HCL are already free from a variety of pre-agreed allergens however they do require further information from **parents of children with allergies and intolerances to ensure all of their records are up to date and correct.**

Please complete and return to the office the slip below if your child has a food allergy, intolerance or dietary requirement (for example a religious observance). Following the completion of the form Hertfordshire Catering Limited will be in contact with you to arrange a meeting to discuss your child's needs in greater detail, if needed. We might also be in contact to discuss any details. Please complete this form even if your child has a school dinner on an infrequent basis. These forms need to be returned to the office by **Tuesday 15th September. If we do not receive a slip back from parents we will assume that your child has no specific dietary needs.**

If you have already informed the office of any allergies, intolerances or dietary requirements **please do complete this form** again as we would just like to check these against the details we already have.

Please do not hesitate to see me if you have any questions or need support in completing the form.

Yours sincerely,

Miss Charlotte Davis
Deputy Headteacher

Allergies and dietary requirements

Name of child: _____

Year group: _____

Details of allergy/ intolerance/dietary requirement:

Signature of parent/ carer: _____

Contact number: _____

