

Deep Portage Kitchen
2197 Nature Center Drive NW
Hackensack MN 56454
218-682-2325
deeportagekitchen@outlook.com

Deep Portage Learning Center is committed to making your stay at our facility a positive experience. This extends to the food you will eat during your stay. Our menus are filled with common, home-cooked meals, and adjustments are made for necessary dietary requests only. We are happy to assist you with dietary concerns such as allergens and other food restrictions within our capabilities, as our meals are prepared and cooked in our kitchen. However, due to our location, this all takes planning and time to order food prior to your arrival.

Because of this, it is essential that the Food Survey Sheets are completed and submitted to the Deep Portage kitchen at least fourteen days prior to your visit if you have dietary needs of any kind whether they are caused by allergens, sensitivities, intolerances, or religious or personal preferences. By completing and submitting the Food Survey Sheet in a timely manner, it will allow us the time needed to review your requests and determine whether we can provide that service or if it is necessary for you to provide your own food during your visit. If you do not have diet restrictions, it is not necessary to submit the survey.

Although any food can be an allergen, the most common are: milk, eggs, peanut, wheat, soy, fish, shellfish and tree nuts. Deep Portage is a facility that has and cooks with some of these products on a daily basis so it is extremely important to know if there may be reactions among visitors in order to eliminate potential issues. Note: This is not a restaurant and we do not prepare food to order.

After reviewing the Food Survey Sheets, visitors may be required to bring their own food, depending on severity of reactions and/or complexity of the dietary restriction. If a visitor is required to supply their food, there will be an area set up to store it properly. This includes refrigeration, so precooked meals are welcome and suggested under these circumstances.

Food Survey Sheets that are completed fourteen days prior to arrival will have the proper food available for the visitor's first meal at an alternative serving table. It is the responsibility of the visitor to check in at that meal so we are aware of their attendance and will continue to provide assistance throughout their stay. It is visitor's responsibility to communicate with our kitchen ahead of time, as well as during the visit, and to eat the food alternatives provided.

Thank you for taking the time to fill out the survey and submitting them in a timely manner.

If you have any questions or concerns, please feel free to contact us.

Tamie Fairbanks
Food Service Director

Food Survey Sheet

This sheet is for parents of students, chaperones, and school staff to complete in the case of the individual having a dietary restriction of any kind. By providing us with information regarding dietary needs, we can better serve your child or yourself. Once completed, please send the completed form to the Deep Portage kitchen at deepportagekitchen@outlook.com.

Name: _____

Age: _____

School or Group: _____

If your child or you have a food allergy, please answer the following questions:

1) Please list the food(s) that cause allergic reactions:

2) If your allergy is gluten and you are celiac, you are required to bring your own food.

3) When does the allergen cause reactions? Please check all that apply:

- The food is ingested
- The food is touched
- The food is in close proximity

4) What was the date of the last reaction?

5) What was the reaction response? Please check all that apply:

- Anaphylaxis
- Vomiting, Nausea
- Diarrhea
- Hives, Itching, Eczema

6) Can your child or you eat foods processed in a facility that handles the allergen?

7) Can your child or you eat foods processed on equipment also used to prepare foods that contain the allergen(s)?

If your child or you have a lactose intolerance or egg intolerance, please answer the following questions:

1) Can your child or you consume foods containing lactose by taking a medication similar to Lactaid?

2) Can your child or you eat foods with lactose or eggs baked in? (example: pancakes, desserts, etc.)

If your child or you cannot eat animal products, please answer the following questions:

(please note, this may be a cultural or religious choice and may not be due to an allergy)

1) Is your child or are you vegetarian?

2) Is your child or are you vegan?

3) Which animal products can your child or you NOT eat? Please check all that apply:

- | | |
|--|-------------------------------|
| <input type="checkbox"/> Beef | <input type="checkbox"/> Pork |
| <input type="checkbox"/> Poultry (Chicken or Turkey) | <input type="checkbox"/> Fish |