

# G.R.E.A.T. Camp Experience at MCYC

## Group Detail Form

Group Name:	Dates Attending:	
Group Contact:	Phone Number:	
Contact Email Address:	# of Kids:	# of Adults:

Please fill out the following information, so that our food service staff can best accommodate any dietary needs your group may have. **This information is needed at least 12 days prior to your visit to MCYC.**

Please email or send this form to [programs@mcyc.org](mailto:programs@mcyc.org). Thanks!

### Dietary Concerns/Restrictions:

Please use this space to tell us of any campers needing special arrangements. MCYC can accommodate pre-communicated peanut / tree nut free, gluten free, dairy free and vegetarian food restrictions. Other allergies / restrictions may need to bring supplemental food options.

Allergy/Restrictions

# of campers

Please note any specific details here

Vegetarians

Peanut /Tree Nut Allergies

Gluten Free

Dairy Free

**If you or a parent would like to speak directly with the Food Service Director, please call the camp at 810.664.8040.**

Will you allow your campers to drink coffee and hot tea while at camp? **YES NO**

Would you like the camp store open during your visit? **YES NO** The store is always open on Saturdays from 2:30 – 5 p.m.

Would you like a different time? What time would be good for you?

\_\_\_\_\_  
Group Leader Signature

\_\_\_\_\_  
Date