

## LTS CATERING MEDICAL DIET DISCLAIMER FORM

### Notes for completing the Disclaimer Form

**The disclaimer form must only be completed if you are happy to manage your child's dietary requirements without needing a medical diet menu.**

Please note: the school menu cannot be altered by any of the catering staff if you complete this form.

We would always recommend that your child has a medical diet menu provided if they have an allergy or intolerance to a food(s). However, we are aware that some foods are not on our menu or are not likely to be on our menus in the future e.g. mussels, lupin flour. Hence, you can manage your child's medical diet without needing a medical diet menu.

It is very important that you read the disclaimer notes on this form before signing. Once you have completed this form, please return it to the address at the bottom of the form and keep a copy for your records. Once we have received the form, we will send out an acknowledgement letter to confirm this. A copy of this letter will also be sent to the school office and the school kitchen.

**Please complete all sections in CAPITAL LETTERS**

### CHILD'S DETAILS

Child's Name ..... Date of Birth ..... Male  Female

Address .....

..... Postcode .....

### SCHOOL DETAILS

Name of School .....

School Address .....

.....

### PARENT/GUARDIAN'S DETAILS

Name ..... Phone Number .....

Address.....

(If different from above)

.....

Email Address .....

**DISCLAIMER**

**I confirm** that my child has a medical dietary requirement which includes an allergy/intolerance to certain foods/ingredients. Leicestershire County Council has advised that my child should receive a medical diet menu to take account of their medical dietary requirement.

**I confirm** that I do not require my child to receive a medical diet menu and I will take steps to ensure that my child chooses food that takes account of the medical dietary requirement from the school meals menu published by Leicestershire County Council or I will provide my child with a non-school meal (e.g. packed lunch).

**I acknowledge and accept** that without a medical diet menu in place:

- (a) Leicestershire County Council cannot guarantee that any foods/ingredients to which my child has an allergy/intolerance will not be consumed by my child, and**
- (b) to the extent permitted by law, Leicestershire County Council shall have no liability howsoever arising should such foods/ingredients be consumed by my child.**

Signed .....

Date .....

**Please return to:** School Meals Dietitians, Leicestershire Traded Services, Room G10, County Hall, Glenfield, Leicester, LE3 8RA **or email to** [SMD@leics.gov.uk](mailto:SMD@leics.gov.uk) (photo/scanned copy accepted - please ensure it is clear). This information will then be sent to your child's school catering team.

**If you would like to discuss your child's dietary requirements with the School Meals Dietitians team, please email** [SMD@leics.gov.uk](mailto:SMD@leics.gov.uk) **or telephone** 0116 305 7058.