



Minnesota Law Enforcement Explorer Association

2018 State Conference Special Diet and Needs

(Please Print or Type)

Explorer Post and Number: _____

Our menu for this years conference has not been decided and could be subject to change with out notice.

Please indicate the name or names of your group who need a special meal, circle or check what you need. The person then **MUST** wear a second wristband indicating a special meal to the catering staff. It will be the responsibility of the person listed below to get their special meal.

Name: _____ Gluten Free ___ Pork Free ___ Vegetarian ___

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If someone in your group has other needs other than a special meal, please list their name and what they need and every attempt will be made to accommodate them.

Name: _____ Need: _____

Name: _____ Need: _____

Name: _____ Need: _____

Name: _____ Need: _____

Name: _____ Need: _____