

# Allergen Disclosure Consent Form

## Personal Information

Full Name

Email Address

Date

## Allergen Disclosure

Please list any known allergens

Check applicable allergens:

- ☐ Peanuts
- ☐ Tree Nuts
- ☐ Milk
- ☐ Egg
- ☐ Wheat
- ☐ Soy
- ☐ Fish
- ☐ Shellfish

## Consent

☐

I acknowledge that I have disclosed all known allergens and understand the risks associated with allergen exposure.

Signature