



Allergy Questionnaire

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We ask that you provide any allergy information or dietary requirements that you would like to share with us below. Please do note that all information on this form is entirely optional and wholly confidential. It will be shared with the **HIGH FIDELITY** stage management team, props team, and costumes team in order to facilitate a safe and comfortable environment for you and our company as a whole.

Name: \_\_\_\_\_

Role: \_\_\_\_\_

Date: \_\_\_\_\_

What food allergies would you like us to be aware of?

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What dietary concerns or information would you like us to be aware of?

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Are there any allergies to laundry or detergent that you would like us to be aware of?

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Are there any other allergies you would like us to be aware of?

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If you become aware of any new allergies during this production, please inform stage management as soon as possible.