

# Hotel Stay Dining Preferences Intake Form

Please complete this form to help us customize your culinary experience during your stay. Once filled out, please present this form to the reception desk or your personal concierge.

## 1. Guest & Stay Information

Primary Guest Full Name:

Room / Suite Number:  Confirmation Number:

Arrival Date:  Departure Date:

## 2. Dietary Restrictions, Allergies, & Lifestyles

Food Allergies (e.g., Nuts, Shellfish, Dairy, Gluten):

Dietary Lifestyles (e.g., Vegan, Vegetarian, Halal, Kosher, Low-Sodium):

Ingredients to Avoid (Disliked foods or general preferences):

## 3. Dining Schedule & Location Preferences

Preferred Breakfast Time:  Preferred Breakfast Venue (e.g., Room Service, Main Restaurant):

Preferred Lunch Time:  Preferred Lunch Venue (e.g., Poolside, Bistro, Grab-and-Go):

Preferred Dinner Time:  Preferred Dinner Venue (e.g., Fine Dining Restaurant, Terrace, Room Service):

## 4. Seating & Environment Preferences

Table Location Preference (e.g., Window Side, Quiet Corner, Near Entrance, Outdoor):

Accessibility or Seating Assistance Needs (e.g., Highchair, Wheelchair Space):

## 5. Beverage Preferences

Preferred Morning Beverage (e.g., Espresso, English Breakfast Tea, Green Juice):

Preferred Evening Beverage (e.g., Still Water, Sparkling Water, Cabernet Sauvignon):

## 6. Special Occasions & Additional Requests

Are you celebrating a special occasion during your stay? (e.g., Birthday, Anniversary):

Specific Culinary Requests or Additional Comments:

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Thank you for taking the time to share your preferences. We look forward to making your stay exceptional.