



# Home Plate Food Questionnaire

Here is your opportunity to let Chef Glenn know what you prefer in your customized menu.

Please check preferences and add comments. For items in parentheses, please circle those you LIKE.

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Zip \_\_\_\_\_

Email: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

Evening Phone: \_\_\_\_\_

## MEATS:

- Beef (steak, roasts, ground round)
  - Pork (chops, roasts, ribs, bacon, ham, ground)
  - Veal (stew, ground, scallops)
  - Lamb (chops, stew, ground, roasts)
  - Meatloaf
  - Meat and vegetable, pasta casseroles
- Comments: \_\_\_\_\_

- Ranch
  - Vinaigrette
  - French
  - Oil/vinegar
  - Red wine/vinegar
  - Thousand Island
  - Other (identify)
- Comments: \_\_\_\_\_

## GRAINS:

- Bran (wheat, oat)
  - Bulgur wheat
  - Granola
  - Millet
  - Oatmeal
  - Orzo
  - Pasta
  - Pita (whole wheat)
  - Potatoes
  - Rice (brown, white)
  - Couscous
  - Quinoa
  - Wheat (tortilla, flour)
  - Corn (tortilla, kernel, meal)
  - Other (identify)
- Comments: \_\_\_\_\_

## POULTRY:

- Chicken (breasts, thighs, ground, etc.)
  - Turkey (breasts, smoked, ground, scalloped, etc.)
  - Chicken or turkey meatloaf
  - Chicken or turkey and vegetable, pasta casseroles
- Comments: \_\_\_\_\_

- ## SOUPS:
- Creamed (name type) \_\_\_\_\_
  - Hot
  - Cold
  - Chunky
  - Clear
  - With meat/poultry?
  - Soups as a main dish?
- Comments: \_\_\_\_\_

## FISH/SHELLFISH:

- Fish (Anchovies, Dover sole, halibut, salmon, striped bass, orange roughly, catfish, snapper, trout, swordfish)
  - Shrimp
  - Scallops
  - Crab
  - Lobster
  - Clams
  - Mussels
  - Tuna (canned, fresh)
- Comments: \_\_\_\_\_

- ## VEGETABLES:
- Green ( artichokes, avocado, arugula, bok choy, broccoli, brussel sprouts, capers, peas, green beans, spinach, asparagus, peppers, celery, snow peas, cucumber, eggplant, endive, green onion, cabbage, pea pods, celery, mustard greens, iceberg lettuce, kale, okra, olives, romaine lettuce, spinach)
  - Orange (carrots)
  - Yellow (corn, wax beans, squash, peppers)
  - Red (pimento, red cabbage, beets, tomatoes, peppers, sweet potatoes/yams, radicchio, radish, sun-dried tomatoes)
  - White (cauliflower, potatoes, parsnips, water chestnuts, bean sprouts, onions, mushrooms, leeks, hearts of palm, jicama, water chestnuts)
  - Beans (black, ranch-style, pinto, kidney, lima, white, pink, Edamame (soy), fava, garbanzo (chickpeas), lentils, navy, cannellini)
  - Onions (cooked, raw, shallots)
  - Squash (baby squash, summer, yellow, zucchini)
- Comments: \_\_\_\_\_

## FRUITS/BERRIES:

- Red (Apple (juice, fresh), cherries, cranberries, grapes, strawberries, watermelon)
  - Orange (apricot, cantaloupe, grapefruit, mango, nectarine, orange, papaya, peach)
  - Yellow (banana, lemon, pear, pineapple)
  - Purple/Blue ( blueberries, fig, plum, raspberries, black berries)
  - Coconut (flakes, Milk)
  - Dried Fruit (dates, fig, plum, raisins, currants)
  - Green (grapes, honeydew, kiwi, lime)
- Comments: \_\_\_\_\_

## SALADS:

- Fresh Green (choice of greens/lettuces, such as Romaine, red leaf, bibb, mixture, spinach)
  - Fruit
  - Pasta
  - Salads as a main dish?
- Comments: \_\_\_\_\_

## BREADS:

- Wheat
  - White
  - Rolls (white or wheat, sour dough, etc.)
  - Biscuits
  - Cornbread
  - Muffins
  - Pancakes
  - Waffles
  - Tortillas
- Comments: \_\_\_\_\_

## SALAD DRESSINGS:

- Mayonnaise

**SEASONINGS/FLAVORS:**

- Basil, bay leaves, cayenne pepper, oregano, sage, rosemary, tarragon, fennel, cumin, cilantro, paprika, parsley, celery, chili powder, chili pepper, cinnamon, cocoa powder, crushed red pepper, curry, dill, parsley, mint, saffron, thyme
- Fresh garlic, garlic-trace, ginger, horseradish, wasabi
- Sugar (brown, white)
- Pepper (white, black, red)
- Salt (regular or Kosher, sea salt)
- Barbecue sauce, marinara sauce
- Sweet sauces
- Chocolate, vanilla, graham cracker
- Coffee
- Honey, maple syrup, molasses
- Mayonnaise, mustard, ketchup
- Pickles, pickled vegetables
- Mirin, Miso, Soy sauce, Teriyaki Sauce,

**Sweet & Sour Sauce**

- Salsa (fruit, tomato)
- Smoked
- Vinegar, Worcestershire

Comments: \_\_\_\_\_

**FATS/OILS:**

- Butter
- Margarine
- Oil (canola, corn, olive, vegetable, flaxseed, sunflower, peanut)
- Lard
- Shortening

Comments: \_\_\_\_\_

**MILK AND MILK PRODUCTS:**

- Cheeses (parmesan, cheddar, swiss, muenster, feta, mozzarella, goat, fontina, soy)
- Milk (skim, 1%, 2%, whole)
- Buttermilk
- Cottage cheese, ricotta cheese
- Cream Cheese
- Yogurt
- Sour cream
- Half and half, heavy cream

Comments: \_\_\_\_\_

**EGGS:**

- Whole
- Yolks only
- Whites only
- Eggbeaters substitute

Comments: \_\_\_\_\_

**OTHER:**

- Tofu (block, mashed)
- Tempeh
- Soy-based meatless products
- Nuts (pecans, peanuts, peanut butter, pine nuts, walnuts, almonds, macadamia, cashews, Brazil, soy nuts)
- Seeds (poppy, sesame, pumpkin, sunflower)

Comments: \_\_\_\_\_

List any vegetables or fruits you don't ever want to see \_\_\_\_\_

List any other food dislikes. \_\_\_\_\_

List any known food allergies VERY IMPORTANT! \_\_\_\_\_

Are you currently on a restricted diet? If yes, describe. \_\_\_\_\_

Have you lost ten or more pounds before? If yes, how many times? \_\_\_\_\_

What diet programs, plans, or products have you tried in the past? \_\_\_\_\_

Do you have overweight parents? (Circle) One, Both, Neither \_\_\_\_\_

Do you have any history of the following: heart disease or stroke, diabetes, high blood pressure, high cholesterol, digestive disorder, depression, sleep disorder, cancer, other. Please describe \_\_\_\_\_

Have you had surgery within the last year? If yes, what type? \_\_\_\_\_

Do you Smoke? If yes, how many cigarettes per day? \_\_\_\_\_

Do you drink alcohol? If yes, how many drinks per day? \_\_\_\_\_

Do you consume caffeine? If yes, how many times per day? \_\_\_\_\_

Are you pregnant? If yes, are you lactating? \_\_\_\_\_

Are you taking any prescription medications? If yes, what? Note whether regular or occasional. \_\_\_\_\_

Are you taking any over-the-counter medications or herbal supplements? If yes, what? Note whether regular or occasional. \_\_\_\_\_

Do you exercise? Please describe the types, frequency, and duration \_\_\_\_\_

What do you eat on a typical Day?

Breakfast \_\_\_\_\_

Lunch \_\_\_\_\_

Dinner \_\_\_\_\_

Snacks \_\_\_\_\_

Rate your preference for spicy foods. (Circle) bland/mild/moderate/very \_\_\_\_\_

Do you have any favorite recipes that I can prepare for you? \_\_\_\_\_

Do you have a barbecue? Do you and want meals prepared it? \_\_\_\_\_

International cuisine? Mexican/curries/Italian. \_\_\_\_\_

What Best describes your eating habits? Check one.

Prefer to try a variety of different meal types

Prefer to find favorites and have many repeats

Food Preferences: are you on a specialized diet? Low-cal, low carb, low-fat, low-to-no-salt, vegetarian, diabetic, lactose-intolerant \_\_\_\_\_

Favorite: Cookies \_\_\_\_\_

Favorite: Dessert \_\_\_\_\_

If married, when is your anniversary? \_\_\_\_\_

Family members (names/birthdays) \_\_\_\_\_

Notes: \_\_\_\_\_