Field Trip School Meal Request

Directions: Parents, please fill out this form and return it to the cafeteria at least 2 days before the meal is requested. At the elementary level, please hand this form into your student's classroom teacher. For example, if you are requesting a lunch for Thursday this form should be handed in by Tuesday.

Parents must either submit exact change with this form, or indicate that the student's account should be used to pay for the meal. Students receiving a free meal should indicate "student account". Students receiving a reduced meal should either indicate student account if possible or submit the necessary money.

Meal Prices:

Lunch	High School	$2.30
	Middle School	$2.25
	Elementary School	$2.00
	Reduced Lunch	$0.40

Student Name: _____ **School**: _____

Student's Room Number: _____

Day & Date of Meal Requested: _____

Payment Method (please circle): Cash Enclosed Student Account

Lunch Request (please circle):

Turkey Hoagie with Cheese OR Peanut Butter & Jelly

Fruit (select two): Fresh Fruit Fruit Cup Fruit Juice

Milk: Low-fat Chocolate Milk OR Low-fat White Milk

Students will also receive a treat with their school lunch!

Please indicate any dietary restrictions: _____

_____

Thank you for your school meal order!
If you have any questions while completing this form please call the Food Service Department at 856-424-2316.