

Breakfast & Lunch Order Form

STUDENT'S NAME: _____ Room # & Building: _____

December Order Form

(Ex. 12L, 4U)

This form must be submitted by November 16, 2018.

Please review the attached menus and check off the day(s) your child would like to order breakfast and/or lunch.

An order form must be submitted in order to receive a meal.


Payments must be submitted with this order form in order for your child to receive a breakfast/lunch.

Breakfast – Cost \$1.75 (If you qualify for reduced, the rate is \$0.30)

Lunch - Cost \$3.25 (If you qualify for reduced, the rate is \$0.40 for each meal.

If you qualify for free lunch, no payment is due.

(Please put an X to indicate you would like to purchase that meal)

Day of the week	Breakfast	Lunch
Monday, December 3, 2018		
Tuesday, December 4, 2018		
Wednesday, December 5, 2018		
Thursday, December 6, 2018		
Friday, December 7, 2018		Half Day – No Lunch
Monday, December 10, 2018		
Tuesday, December 11, 2018		
Wednesday, December 12, 2018		
Thursday, December 13, 2018		
Friday, December 14, 2018		
Monday, December 17, 2018		
Tuesday, December 18, 2018		
Wednesday, December 19, 2018		
Thursday, December 20, 2018		
Friday, December 21, 2018		
Monday, December 24, 2018 Thru Wednesday, January 2, 2019	<p>Winter Break!</p> <p>See you all on</p> <p>Thursday, January 3, 2019!</p> 	
Total	(15)	(14)

Total Amount Due: _____ **PHONE #:** _____

Circle Payment Method Used: Online Payment # _____ Cash Money Order (Sorry, No Checks)

FOR OFFICE USE ONLY

Form of Payment Received: Cash Money Order Online Payment # _____

Total Amount Paid: _____ Verifier's Initials: _____