

HOT LUNCH MONTHLY ORDER FORM—DEADLINE: _____

Prices: Main Course: \$2.00 Drink \$0.50 Dessert \$0.50 = \$3.00 (seconds same price)

Month: _____

Family Name: _____

Week 1: _____

Week 2: _____

Week 3: _____

Week 4: _____

Remember:

Forms must be returned to the office by the deadline!

All Staff that are parents will order on a separate form at school.

Parents: Please do not use check marks, use numbers (i.e. 1 or 2 for quantity).

Note: 2 cookies = 1 dessert order, 1 square = 1 dessert order.

Office only: _____

Student Name	Grade	Main Course	Drink	Dessert	Weekly Total
Week 1					
					\$
					\$
					\$
					\$
					\$
Week 2					
					\$
					\$
					\$
					\$
					\$
Week 3					
					\$
					\$
					\$
					\$
					\$
Week 4					
					\$
					\$
					\$
					\$
					\$
Monthly Total					\$

***** Please total carefully and submit EXACT payment with order!*****

CUT OFF _____ FOR YOUR RECORDS _____ CUT OFF

Parent's Record: Fill in and keep for the month of _____.

Name	MC 1	DK 1	DS 1	MC 2	DK 2	DS 2	MC 3	DK 3	DS 3	MC 4	DK 4	DS 4

Week 1: _____

Week 3: _____

Week 2: _____

Week 4: _____