

SAINT STEPHEN SCHOOL LUNCH PROGRAM -- MONTHLY ORDER FORM

DUE ON OR BEFORE Friday, February 16, 2018

PLEASE FILL OUT ONE FORM FOR EACH STUDENT - Your order form and payment MUST be received by the due date or it will be returned to you.

Dear Parent(s)/Guardian(s): Below are the lunch selections for this month. Students may order more than one meal for a day, i.e., two slices of pizza for a total cost of \$3.00, or they may order two sandwiches for a total cost of \$7.00 etc. Any combination offered for that day is acceptable. Please indicate the number of meals and cost and circle the dates for those meals. We hope that this form is straightforward, however; if there are any questions, please feel free to contact Mrs. Fitch or the School Office at 508-755-3209.



Monday	Pasta/Italian Bread/Salad \$ 3.50 # of meals per day _____ Total Cost _____ Dates ordered – (please circle) 3/5 3/12 3/19 3/26				Pasta without Sauce/ Italian Bread/ Salad \$3.50 # of meals per day _____ Total Cost _____ Dates ordered – (please circle) 3/5 3/12 3/19 3/26							
	Wednesday	Tuna Grinder \$3.50 # of grinders per day _____ Total Cost _____ Dates ordered– (please circle) 3/7 3/14 3/21 3/28		Italian Grinder: \$3.50 # of grinders per day _____ Total Cost _____ Dates ordered– (please circle) 3/7 3/14 3/21 3/28		Turkey Grinder: \$3.50 # of grinders per day _____ Total Cost _____ Dates ordered– (please circle) 3/7 3/14 3/21 3/28		BLT: \$3.50 # of grinders per day _____ Total Cost _____ Dates ordered– (please circle) 3/7 3/14 3/21 3/28		Meatball: \$3.50 # of grinders per day _____ Total Cost _____ Dates ordered– (please circle) 3/7 3/14 3/21 3/28		Salad & 2 Breadsticks \$2.75 # of Salads per day _____ Total Cost _____ Dates ordered– (please circle) 3/7 3/14 3/21 3/28
Friday		Slice Cheese Pizza \$1.50 per slice # of slices per day _____ Total Cost _____ Dates ordered – (please circle) 3/9 3/16 3/23				Salad and 2 Breadsticks \$2.75 # of salads per day _____ Total Cost _____ Dates ordered – (please circle) 3/9 3/16 3/23						

STUDENT NAME: _____ GRADE: _____

TOTAL COST FOR MONTH \$ _____

PLEASE MAKE CHECKS PAYABLE TO ST. STEPHEN SCHOOL