

Sack Lunch Request

Date of Request: _____ (at least two weeks in advance please)

Lunches Requested By: _____

Approved By Principal: _____

Date Sack Lunches Are Needed: _____ Time: _____

Estimated Count: _____ (Please remember this should include all children, chaperones, teachers, bus drivers, etc.)

Please Note: It is the responsibility of the person requesting the lunches to provide the café staff with the exact count 24 hours in advance and name of accounts to charge on the date requested above before leaving for trip.

Coolers and/or boxes full of lunches will be ready for you to load on buses at the time requested above.

Each teacher should fill out one form for his/her classroom per trip.

Please return to school office for administrative approval.