



Centre Inc.

"Teaching - Learning - Caring"

I, _____, would like to order lunch on the following date(s) for my child or children

- A. _____
- B. _____

Week One:	Monday:	Wednesday:	Friday:
	Menu: Rice with chicken, vegetables, fruit and milk.	Menu: Pasta with tomato sauce and cheese, meatballs, vegetables, fruit and milk.	Menu: Tomato soup, grilled cheese, vegetables, fruit and milk.
Week Two:	Monday:	Wednesday:	Friday:
	Menu: Quesadilla with cheese, beans, sour cream, salsa, vegetables, fruit and milk.	Menu: Fish sticks, rice, vegetables, fruit, and milk.	Menu: Hot dog on a bun, condiments, vegetables, fruit and milk.
Week Three:	Monday:	Wednesday:	Friday:
	Menu: Rice with chicken, vegetables, fruit and milk.	Menu: Pasta with tomato sauce and cheese, meatballs, vegetables, fruit and milk.	Menu: Tomato soup, grilled cheese, vegetables, fruit and milk.
Week Four:	Monday:	Wednesday:	Friday:
	Menu: Quesadilla with cheese, beans, sour cream, salsa, vegetables, fruit and milk.	Menu: Fish sticks, rice, vegetables, fruit, and milk.	Menu: Hot dog on a bun, condiments, vegetables, fruit and milk.

Please put a check mark beside the lunches that you would like to sign your child up for. The cost is \$3.50 per meal.

Week One: Nov 23-27	Monday: <input type="checkbox"/> A <input type="checkbox"/> B	Wednesday: <input type="checkbox"/> A <input type="checkbox"/> B	Friday: <input type="checkbox"/> A <input type="checkbox"/> B
Week Two: Nov 30-Dec 4	Monday: <input type="checkbox"/> A <input type="checkbox"/> B	Wednesday: <input type="checkbox"/> A <input type="checkbox"/> B	Friday: <input type="checkbox"/> A <input type="checkbox"/> B
Week Three: Dec 7-11	Monday: <input type="checkbox"/> A <input type="checkbox"/> B	Wednesday: <input type="checkbox"/> A <input type="checkbox"/> B	Friday: <input type="checkbox"/> A <input type="checkbox"/> B
Week Four: Dec 14-18	Monday: <input type="checkbox"/> A <input type="checkbox"/> B	Wednesday: <input type="checkbox"/> A <input type="checkbox"/> B	Friday: <input type="checkbox"/> A <input type="checkbox"/> B

Total amount of lunches _____ x \$3.50 = _____

Please submit payment and return by **November 19, 2020**.

Cheque attached e-Transfer submitted on _____

I am aware that if my child is unexpectedly absent on a day, they were to participate in the Hot Lunch Program, I will not be reimbursed, as groceries will have already been purchased at the time.

Parent/Caregiver Signature