



Saint Mary's School September Food Order Form COMPLETE A SEPARATE FORM FOR EACH CHILD

If you wish to order food /milk, please complete the form below and submit payment by **Mon. Sep.10/18** for food and milk for the month of **September**. **No further orders can be accepted after this date** as time is required to tabulate orders and provide this information to our suppliers and to classroom teachers. Please keep in the mind the following:

Thank you.

Ms. L. Hetherington
Office Administrator

Student Name: _____ Teacher: _____
First and Last Name

Item	Quantity	Item	Quantity	Item	Quantity
		Pizza Sep. 19/18	__ x\$2.00 = __		
		Pizza Sep. 26/18	__ x\$2.00 = __		
Total:	\$	Pizza Total:	\$		\$

I wish my child to have milk everyday (8 days X \$.80 each= \$6.40)

- Chocolate
- White



or....

- I wish my child to have milk only on the following days only in **September**:

Monday	Tuesday	Wednesday	Thursday	Friday
	18 __ Choc __ White	19 __ Choc __ White	20 __ Choc __ White	21 __ Choc __ White
24 __ Choc __ White	25 __ Choc __ White	26 __ Choc __ White	27 __ Choc __ White	28 PA DAY

Grand Total of order: _____

Cheques are much preferable to, and safer than cash. Please make cheque payable to "Saint Mary's School". If you are using refund tickets for partial payment, you must attach them to this form with payment.

Office Use: _____ cash _____ cheque Tickets _____
