 **Saint Mary’s School April 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. Mar.18/19*** for food and milk for the month of **April.** **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

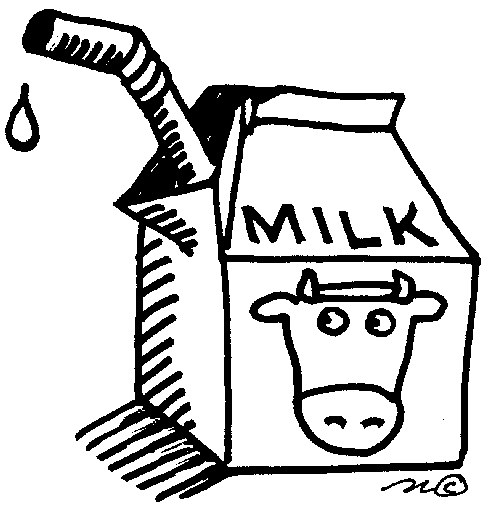
Office Administrator

Student Name:\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Teacher:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First and Last Name

|  |  |  |  |
| --- | --- | --- | --- |
| **Item** | **Quantity** | **Item** | **Quantity** |
| Pizza Apr. 03/19 | \_\_\_\_ x$2.00 = \_\_\_\_\_ |  |  |
| Pizza Apr. 10/19 | \_\_\_\_ x$2.00 = \_\_\_\_\_ |  |  |
| Pizza Apr. 17/19 | \_\_\_\_ x$2.00 = \_\_\_\_\_ |  |  |
| Pizza Apr. 24/19 | \_\_\_\_ x$2.00 = \_\_\_\_\_ |  |  |
| **Pizza Total** | $ |  |  |

\*\*\*\*\*\* ***Lent begins on March 6-April 18/19 so cheese pizzas only will be eaten during this time****. \*\*\*\*\*\**

* I wish my child to have milk everyday (20 days X $ .80 each) = 16.00
  + Chocolate
  + White

***or….***

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

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** |
| 1 \_\_\_ Choc \_\_\_ White | 2 \_\_\_ Choc \_\_\_ White | 3 \_\_\_ Choc \_\_\_White | 4 \_\_\_ Choc \_\_\_White | 5\_\_\_ Choc \_\_\_ White |
| 8  ***\_\_\_*** Choc \_\_\_ White | 9  ***\_\_\_*** Choc \_\_\_ White | 10  ***\_\_\_*** Choc \_\_\_ White | 11  ***\_\_\_***Choc \_\_\_ White | 12  ***\_\_\_***Choc \_\_\_ White |
| 15 \_\_\_ Choc \_\_\_ White | 16 \_\_\_ Choc \_\_\_ White | 17 \_\_\_ Choc \_\_\_White | 18 \_\_\_ Choc \_\_\_White | 19 ***Good Friday*** |
| 22 ***Easter Monday*** | 23 \_\_\_ Choc \_\_\_ White | 24 \_\_\_ Choc \_\_\_White | 25 \_\_\_ Choc \_\_\_White | 26 \_\_\_ Choc \_\_\_White |
| 29 \_\_\_ Choc \_\_\_ White | 30 \_\_\_ Choc \_\_\_ White |  |  |  |

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 \_\_\_\_\_\_\_\_\_\_\_