

HILLTOWN SCHOOL LUNCH ORDER FORM OCTOBER 2016

Orders must be received by 12:00 the school day before delivery

All lunches include a fruit or veggie side. Milk can be purchased separately. We can't accept late or special orders.
If your child has food allergies, please consult the school Nurse at x113 about lunch ingredients.

⇒ **STUDENT'S FULL NAME (one per form):** _____

MON OCT 3	TUE OCT 4	WED OCT 5	THU OCT 6	FRI OCT 7
1 <input type="checkbox"/> hamburger	1 <input type="checkbox"/> macaroni & cheese	1 <input type="checkbox"/> american chop suey (meat)	1 <input type="checkbox"/> rice w/veggies	1 <input type="checkbox"/> grilled ham and cheese
2 <input type="checkbox"/> black bean chili		2 <input type="checkbox"/> black bean chili	2 <input type="checkbox"/> black bean chili	2 <input type="checkbox"/> grilled cheese
<input type="checkbox"/> milk	<input type="checkbox"/> milk	<input type="checkbox"/> milk	<input type="checkbox"/> milk	<input type="checkbox"/> milk

MON OCT 10	TUE OCT 11	WED OCT 12	THU OCT 13	FRI OCT 14
NO SCHOOL	1 <input type="checkbox"/> macaroni & cheese	1 <input type="checkbox"/> american chop suey (meat)	1 <input type="checkbox"/> rice w/veggies	1 <input type="checkbox"/> grilled ham and cheese
COLUMBUS DAY		2 <input type="checkbox"/> black bean chili	2 <input type="checkbox"/> black bean chili	2 <input type="checkbox"/> grilled cheese
	<input type="checkbox"/> milk	<input type="checkbox"/> milk	<input type="checkbox"/> milk	<input type="checkbox"/> milk

MON OCT 17	TUE OCT 18	WED OCT 19	THU OCT 20	FRI OCT 21
1 <input type="checkbox"/> hamburger	1 <input type="checkbox"/> macaroni & cheese	1 <input type="checkbox"/> american chop suey (meat)	1 <input type="checkbox"/> rice w/veggies	1 <input type="checkbox"/> grilled ham and cheese
2 <input type="checkbox"/> black bean chili		2 <input type="checkbox"/> black bean chili	2 <input type="checkbox"/> black bean chili	2 <input type="checkbox"/> grilled cheese
<input type="checkbox"/> milk	<input type="checkbox"/> milk	<input type="checkbox"/> milk	<input type="checkbox"/> milk	<input type="checkbox"/> milk

MON OCT 24	TUE OCT 25	WED OCT 26	THU OCT 27	FRI OCT 28
1 <input type="checkbox"/> hamburger	1 <input type="checkbox"/> macaroni & cheese	1 <input type="checkbox"/> american chop suey (meat)	1 <input type="checkbox"/> rice w/veggies	1 <input type="checkbox"/> grilled ham and cheese
2 <input type="checkbox"/> black bean chili		2 <input type="checkbox"/> black bean chili	2 <input type="checkbox"/> black bean chili	2 <input type="checkbox"/> grilled cheese
<input type="checkbox"/> milk	<input type="checkbox"/> milk	<input type="checkbox"/> milk	<input type="checkbox"/> milk	<input type="checkbox"/> milk

MON OCT 31				
NO SCHOOL				
Parent/Teacher				
Conferences				

Orders will not be placed without payment. Please use an envelope to keep order & payment together.

Total meals		x \$4.00 per meal =	\$	Meal total
Total milks		X \$0.40 per milk =	\$	Milk total
(Credit request form must be attached)				Deduct Credit
date _____	<input type="checkbox"/> cash	<input type="checkbox"/> check no. _____	(payable to HCCPS)	Total Due