

LUNCH MENU SELECTION - LSLA

All lunches are served with 2% Milk and Fresh Fruit. Daily Fruit served will be based on season availability.

Please make your selections below using the checkboxes. Please fill separate sheets for each child; \$4.25 + taxes per child per day.

	Monday 01/27 <input type="checkbox"/>	Tuesday 01/28 <input type="checkbox"/>	Wednesday 01/29 <input type="checkbox"/>	Thursday 01/30 <input type="checkbox"/>	Friday 01/31 <input type="checkbox"/>
Menu Week 2	Spaghetti With Meatballs Salad	Turkey Hot Dog Cucumbers	Beef + Veggie Rice	Grilled Cheese Corn	Cheese Burger Carrots No Cheese <input type="checkbox"/>
Menu Week 3	Monday 02/03 <input type="checkbox"/> Beef Spaghetti Salad	Tuesday 02/04 <input type="checkbox"/> Spinach Quesadillas Corn No Spinach <input type="checkbox"/>	Wednesday 02/05 <input type="checkbox"/> Black Beans Chicken Rice	Thursday 02/06 <input type="checkbox"/> Chicken Sandwich Carrots	Friday 02/07 <input type="checkbox"/> Chicken Nuggets Mashed Potatoes
Menu Week 4	Monday 02/10 <input type="checkbox"/> Chicken Spaghetti Salad	Tuesday 02/11 <input type="checkbox"/> Turkey Breast and Cheese Croissant / Carrots No Turkey Breast <input type="checkbox"/> No Cheese <input type="checkbox"/>	Wednesday 02/12 <input type="checkbox"/> Cheese Burger Corn No Cheese <input type="checkbox"/>	Thursday 02/13 <input type="checkbox"/> Fish Sticks Broccoli	Friday 02/14 <input type="checkbox"/> Turkey Hot Dog Cucumbers
Menu Week 1	Monday NO SCHOOL	Tuesday 02/18 <input type="checkbox"/> Chicken Sandwich Carrots	Wednesday 02/19 <input type="checkbox"/> Chicken + Veggie Rice	Thursday 02/20 <input type="checkbox"/> Turkey Breast Quesadillas Corn No Turkey Breast <input type="checkbox"/> No Cheese <input type="checkbox"/>	Friday 02/21 <input type="checkbox"/> Chicken Nuggets Mashed Potatoes

If you are a returning customer, please provide the following: Parent Full Name: _____ Child Full Name: _____

If you are a new customer, please provide the following required information; an invoice will be sent to you via email where secure payment can be made:

Parent Full Name: _____ Child Full Name: _____ Child's Grade: _____

Phone Number: _____ Email: _____

Payment Method Accepted: Bank Transfer (free) Debit/Credit Card (\$2.00 payment processing fee will apply)

Please do not provide any bank or credit card information

** Please return filled sheet to administrative office **