

LUNCH SIGN UP SLIP Student Name _____
 Class _____ Week of _____

HOT LUNCH	ALTERNATE	BREAKFAST	SNACK	LUNCH
Includes milk	LUNCH includes milk	includes milk	MILK	MILK
\$2.75	\$2.75	FREE	\$.40	\$.40
Mon. <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tues. <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wed. <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thurs. <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fri. <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TOTAL FOR THE WEEK: _____				
Please return lunch slip and payment on Monday. (If Monday is a holiday, please return lunch slip on the next day school is in session.)				

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