

Monthly Lunch Purchase Calendar PRE-SCHOOL

1. Check off the box beside each day your child will be eating Lunch at school.
2. Total and Submit Payment along with "Purchase Calendar" each month. (One calendar for each student, but you may combine payments for your family).
 - * LUNCH-\$3.00-(FULL PRICE)
 - * LUNCH-\$1.50-(REDUCED PRICE)
3. All cafeteria payments will be handled monthly*

*If your child decides to buy and you haven't already paid, submit payment with a marked envelope on the day of purchase. Include: NAME, SESSION, DATE, AND LUNCH PAYMENT AMOUNT.

Student Name _____ Session _____
(PLEASE PRINT)

Parent Signature: _____

***REMINDER: ALL LUNCH BILLS MUST BE PAID IN FULL MONTHLY.**

LUNCH-SEPTEMBER

Monday		Tuesday		Wednesday		Thursday		Friday	
3				5				7	
10				12				14	
17				19				21	
24				26				28	

TOTAL DAYS _____

TOTAL DAYS X \$3.00= _____ **(FULL PRICE)**

TOTAL DAYS X \$1.50= _____ **(REDUCED PRICE)**

ICE CREAM - FRIDAYS ONLY X \$1.00= _____

TOTAL PAYMENT AMOUNT: \$ _____