

PARAMOUNT UNIFIED SCHOOL DISTRICT  
STUDENT NUTRITION SERVICE FIELD TRIP LUNCH REQUEST FORM

School Site \_\_\_\_\_

Date \_\_\_\_\_

Teacher \_\_\_\_\_

Room# \_\_\_\_\_

Please list the names of your students who would like the café to provide lunches for the upcoming field trip on \_\_\_\_\_ to \_\_\_\_\_ and return form to cafeteria manager.

**Keep in mind: Students who are paid or reduced price will be charged for their field trip lunches.**

STUDENT NAME (Please Print)	LUNCH #	(✓) Student Received Meal
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		
21		
22		
23		
24		
25		

Total student lunches required \_\_\_\_\_

Additional Adult lunches \_\_\_\_\_ \$4.00