

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

School Site _____
Teacher _____

Date _____
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.

If you would like to request a classroom list with lunch #'s please inform Cafe manager.

Confirm attendance of Students the morning of the field trip with Cafe Manager.

Please do not take Field Trip lunches for students who are absent.

Any leftovers, unclaimed meals or adult staff meals will be charge to the school office account.

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 _____ \$5.00