

## Request for Field Trip Lunches

TODAY'S DATE: \_\_\_\_\_

TEACHER'S NAME: \_\_\_\_\_

TOTAL STUDENT MEALS NEEDED: \_\_\_\_\_

TOTAL ADULT MEALS NEEDED (\$3.50/MEAL): \_\_\_\_\_

DATE OF FIELD TRIP: \_\_\_\_\_

DEPARTURE TIME: \_\_\_\_\_

PICK UP TIME : \_\_\_\_\_

STUDENT'S NAME		ID #	Meal Served	\$	STUDENT'S NAME		ID #	Meal Served	\$
1.					21.				
2.					22.				
3.					23.				
4.					24.				
5.					25.				
6.					26.				
7.					27.				
8.					28.				
9.					29.				
10.					30.				
11.					31.				
12.					32.				
13.					33.				
14.					34.				
15.					35.				
16.					36.				
17.					37.				
18.					38.				
19.					39.				
20.					40.				

### INSTRUCTIONS

1. Please notify Nutrition Services at the District Office **10 working days** prior to pending field trip.
2. Complete the form for students requesting cafeteria lunches only. Indicate milk choice, W (lowfat) or C (chocolate). Return the to the Nutrition Services Office at the District Office **5 working days prior** to the field trip date.
3. On the day of the field trip the teacher will need to pick up the lunches, packed in coolers at their site cafeteria.
4. **\*\*In accordance with food safety guidelines all menu items must be offered to students no later than 4 hours after pickup from the cafeteria.\*\***
5. Teacher is responsible for accounting for all meals served and monies owed by students for paid meals.
6. Any unused or unserved meals will be charged to site account.
7. Return completed form, money collected and empty coolers to cafeteria lead upon return.
8. Any damaged or lost equipment will be charged to site.

***Signature below indicates faculty member understands and agrees to all instructions as stated.***

Teacher Signature: \_\_\_\_\_