

**CCA Lunch Program Order Form – May-June 2017**

Please select the hot meals you would like for your child(ren). Please indicate whether small, large or family portion for each meal. Each meal will include a side dish, fresh fruits or vegetables as well as 250ml white or chocolate milk. (Fruit juice is available for dairy sensitive children.)

S – Small portion                      L – Large Portion  
 F – Family Rate (use children’s initials beside each meal if more than one child)

**Deadline Thursday April 20, 2017**

**Family Name** \_\_\_\_\_

Date	Meal	Choice	Date	Meal	Choice
M May 1	Chicken Caesar wrap		Tu May 2	Cheese tortellini with tomato sauce (sauce on side)	
W May 3	Sweet and sour pork		Th May 4	Sub sandwich	
F May 5	Pepperoni Pizza		M May 8	Shrimp penne alfredo (shrimp optional)	
Tu May 9	Taco salad		W May 10	Mild Italian sausage on a bun	
Th May 11	Breakfast sandwich (ham, egg, cheese)		F May 12	Steak Sandwich	
M May 15	CCHS BBQ FUNDRAISER BRING \$ TO BUY HOT LUNCH. DETAILS TO COME!		Tu May 16	Spaghetti	
W May 17	Chicken cacciatore		Th May 18	Beef stroganoff	
F May 19	Pizza		Tu May 23	Homemade hamburger helper	
W May 24	BBQ chicken legs		Th May 25	Pork soulvaki	
F May 26	CCHS BBQ FUNDRAISER BRING \$ TO BUY HOT LUNCH. DETAILS TO COME!		M May 29	Pancake and breakfast sausage	
Tu May 30	Pizza sub		W May 31	Creamy garlic pasta	
Th June 1	Soft shell tacos		M June 5	Chicken Caesar wrap	
Tu June 6	Cheese tortellini with tomato sauce (sauce on side)		W June 7	Sweet and sour pork	
Th June 8	Sub sandwich		M June 12	Shrimp penne alfredo (shrimp optional)	
Tu June 13	Taco salad		W June 14	Mild Italian sausage on a bun	
Th June 15	Breakfast sandwich (ham, egg, cheese)		F June 16	Pizza	
M June 19	Pizza sub		Tu June 20	Spaghetti	
W June 21	Soft tacos		Th June 22	Beef stroganoff	

**Total days on this schedule = 34**

Check here if you would like to order every meal on this schedule for your child(ren) and list names and grades below. If your order varies please fill in each square with children’s names and portion size.

\_\_\_\_\_ X \$4.50 small Portion = \_\_\_\_\_

Please list all allergies / sensitivities

\_\_\_\_\_ X \$5.25 large Portion = \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ X \$11.00 Family Rate = \_\_\_\_\_

\_\_\_\_\_

CREDIT / DATE (ie. Snow days) = \_\_\_\_\_

Total \$ \_\_\_\_\_

Name(s) and grade(s) of children included in the meal program \_\_\_\_\_

\_\_\_\_\_