

Lunch Form

All forms for the upcoming week must be returned no later than Wednesday!

Child's Name: _____ Camp Grade: _____

Week Of: _____

Please (X) mark the box below:

(Please remember that there is a charge of \$4.00 per day that will be added to your child's weekly billing invoice.)

Monday

Alternate

Tuesday

Alternate

Wednesday

Alternate

Thursday

Alternate

Friday

Alternate