

# April

## DISCOVERY SCHOOL HOT LUNCH MENU

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
2 <b>EASTER BREAK</b>	3 CHICKEN NUGGETS MASHED POTATOES CORN GRAPES MILK	4 CHEESE & BEAN QUESADILLAS GARDEN SALAD STRAWBERRY & BLUEBERRY MIX MILK	5 CHICKEN ALFREDO FETTUCCINI BABY CARROTS FRENCH BREAD BANANA MILK	6 PIZZA VEGGIE STICKS MUFFIN MILK
9 STEAK FINGERS MACARONI & CHEESE GREEN BEANS APPLE SAUCE MILK	10 CHEESEBURGER BAKED FRIES SPINACH/TOMATOS/PICKLE PEACHES MILK	11 CHICKEN TACOS RICE/BEANS LETTUCE/TOMATOES STRAWBERRY/BANANA MILK	12 SPAGHETTI & MEATBALLS CORN FRENCH BREAD FRUIT MEDLEY MILK	13 PIZZA SALAD ORANGE MILK
16 DELI SUBMARINE SANDWICH SPINACH/TOMATO/SPINACH BAKED CHIPS SUGAR FREE PUDDING MILK	17 CHICKEN ALFREDO FETTUCCINI ZUCCHINI FRENCH BREAD BANANA MILK	18 CHEESE ENCHILADAS MASHED POTATOES APPLE SAUCE MILK	19 CHICKEN STRIPS MASHED POTATO CARROTS PINEAPPLE MILK	20 PIZZA CARROT STICKS WITH RANCH APPLE MILK
23 CHICKEN NUGGETS MACARONI & CHEESE CARROT STICKS BANANA MILK	24 SPAGHETTI MARINARA BROCCOLI & CHEESE FRUIT MEDLEY MILK	25 CHICKEN BURGER CHEESE STICK LETTUCE/TOMATO/PICKLE PEACHES MILK	26 CHICKEN PARMESAN PASTA ZUCCHINI FRENCH BREAD PINEAPPLE MILK	27 PIZZA SALAD FRUIT MILK
30 ORGANIC HOT DOG CHEESE STICKS/CHIPS STRAWBERRY YOGURT MILK				



## DISCOVERY SCHOOL LUNCH ORDER FORM

DEADLINE TO TURN IN THE LUNCH FORM: Wednesday, February 28, 2018

Child's Name: \_\_\_\_\_ Room Number: \_\_\_\_\_

Choose one:

- \_\_\_\_\_ All month  
20 days x \$4.50 = \$90.00

or

- \_\_\_\_\_ Select days (check the dates)

	Monday	Tuesday	Wednesday	Thursday	Friday
Week 1	EASTER BREAK	3	3	4	5
Week 2	9	10	11	12	13
Week 3	16	17	18	19	20
Week 4	23	24	25	26	27
Week 5	30				

#of Days \_\_\_\_\_ x \$4.50 ea. = \$ \_\_\_\_\_

A rate of \$6.50 will be charged for Drop-in lunches and those lunch orders placed after Wednesday, February 28, 2018.

**REMINDER: IF YOUR CHILD IS GOING TO CAMP ALLEN, DO NOT ORDER LUNCH FROM THE 16<sup>TH</sup> – 20<sup>TH</sup>**

All orders must be accompanied by this signed waiver of liability.

Although I understand that the greatest care will be taken to ensure the safety of the food that will be served to my child, I hereby release The Discovery School & Health Bites for any impact on my child from the consumption of the food in this program

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**Make checks payable to The Discovery School**

\*\*The month must be paid in advance in order to participate in the hot lunch program. The deadline for purchasing the lunch program is Wednesday, February 28, 2018.