CAFETERIA ACCOUNT FORM

*I wish to place money on my child’s account.*

SCHOOL: (CHECK ONE)

EHS\_\_\_\_\_ FMS\_\_\_\_\_ ANTHEIL\_\_\_\_\_ LORE\_\_\_\_\_ PARKWAY\_\_\_\_\_

Student’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Grade:\_\_\_\_\_Date:\_\_\_\_\_\_\_\_

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| --- |
| EHS and FMS: Students may use money for meals, snacks, and beverages and must use their 8 digit student ID number at the cafeteria register for all purchases and to access money on account.  ELEMENTARY AND FMS: If you wish to limit the snacks/beverages your child purchases, contact the Food Service Department at 609-538-9800 x7106 or email foodservice@ewingboe.org |

AMOUNT ENCLOSED:

Check #\_\_\_\_\_\_\_\_\_\_ $\_\_\_\_\_\_\_\_\_\_ OR Cash $\_\_\_\_\_\_\_\_\_\_

*PLEASE NOTE: $10 minimum for checks- payable to Ewing Twp. Food Service—$25 bounced check fee for returned checks*

***(Please print your child’s name and school clearly on the memo line of your check.)***

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