

ST. BERNADETTE SCHOOL LUNCH PROGRAM PROVIDED BY SMS Food Service

***5/5: 3rd Grade Field Study #5/5 – 5/9 : 8th Grade Washington **5/22: 4th, 5th, 6th Grade Field Study**

*****5/26: Memorial Day – No School *****5/27: 7th Grade Field Study**

NAME _____ GRADE _____ DATE _____

Date	Daily Full Lunch PLEASE MAKE YOUR OWN COPY OF THIS FOR YOUR CONVENIENCE.	Full Lunch	PBJ on Whole Wheat Bread Lunch and sides	Turkey & Cheese on Whole Wheat Bread Sandwich Lunch and sides	Salad Lunch- Lettuce, Cuke, Tomato, Turkey & Cheese w/Lite Dressing and sides	Whole Wheat Bagel Lunch and sides	Vegetarian Hot Soup & Crackers and sides NO SOUP ON FRIDAY	Extra Entrée
*#5/5	Chicken Patty Sandwich, Chips, Fruit							
#5/6	American Chop Suey, Bread, Fruit							
#5/7	Hot Dog, Pasta Salad, Fruit							
#5/8	Turkey Chili, Tortilla Chips, Fruit							
#5/9	Pizza, Salad, Fruit						N/A	
5/12	Egg & Cheese on Bulkie, Hash Browns, Fruit							
5/13	Mac & Cheese, Veggie, Fruit							
5/14	Hot Dog, Pasta Salad, Fruit							
5/15	Baked Potato, Assorted Toppings, Fruit							
5/16	Pizza, Salad, Fruit						N/A	
5/19	Cheeseburger, Chips, Fruit							
5/20	Ziti Bake, Bread, Fruit							
5/21	Hot Dog, Pasta Salad, Fruit							
**5/22	Italian Grinder, Chips, Fruit							
5/23	Pizza, Salad, Fruit						N/A	

***5/26	Memorial Day – No School							
****5/27	Bagel, Cream Cheese, Yogurt, Fruit							
5/28	Hot Dog, Pasta Salad, Fruit							
5/29	Meatball Sub, Chips, Fruit							
5/30	Pizza, Salad, Fruit						N/A	

***** FRUIT WILL BE SERVED 5 TIMES A WEEK.

***** SOUPS – Monday – Chicken Soup Tuesday – Cream of Potato Soup Wednesday – Hearty Vegetable Soup Thursday – Tomato Rice

***** **”BEFORE PLACING YOUR ORDER, PLEASE INFORM YOUR SERVER IF A PERSON IN YOUR PARTY HAS A FOOD ALLERGY”** *****

Name _____ Grade _____

Parent E-Mail: _____ (for questions)

Number of Full Lunches _____ @ \$ 4.50 = _____ (Please note price change.)

Number of Extra Entrées _____ @ \$2.25 = _____

Checks must be made out to **SMS Food Service.** Orders are due back **no later than 4/17/25.** **Menus will not be accepted after 4/17/25.** As usual, please send order and check to the school. **Please do not staple the check. Please use 1 menu order form for EACH child.** Thank you. Remember: If you order an extra entrée, you must order a regular lunch also. We are providing this order form early, so that you can plan ahead. We **CANNOT** allow lunch purchases other than those ordered and paid for by the above deadline. Thank you for your cooperation.

Check # _____ Total Amount _____

SUMMARY: Use 1 form per child.

Checks made out to SMS Food Service Name and Grade needed.

Calculate amount due carefully. Make sure slip is returned on time. Order main entrée before ordering side entrées.