

Healthy Snack Cart Form

A healthy snack will be provided to your child each day they are in attendance at school.
The parent/guardian is responsible for paying \$23.00 per trimester or \$68.00 per school year.
Snack will be provided after payment is received. Please make checks payable to: ARES

Parent Name _____

Child's Name _____

Child's Classroom Teacher/Grade _____

	Check #	Cash
\$23.00/trimester 1 2 3	_____	_____
\$68.00/school year	_____	_____

Date Payment Received: _____

PAYMENT DUE to participate for Trimester 1 by September 5th ; Tri 2 by December 5th ; Tri 3 by March 13th

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