FIELD TRIP NOTIFICATION FORM

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SCHOOL NAME: _____ DATE OF TRIP_____

PERSON REQUESTING MEAL(S): _____ DESTINATION_____

GRADE(S)/ORGANIZATION ATTENDING TRIP: _____

DEPARTURE TIME: _____ RETURN TIME_____

DELIVERY TIME _____ DELIVERY LOCATION SCHOOL KITCHEN

NOT REQUESTING MEALS FOR THIS TRIP _____

NUMBER OF STUDENTS MEALS NEEDED - BREAKFAST: _____ LUNCH: _____

* The number of meals offered cannot exceed the number of students attending field trip.

IMPORTANT NOTICE: THE TEACHERS FOR EACH CLASS ARE RESPONSIBLE FOR POINT OF SERVICE MEAL COUNTS AS WELL AS PROVIDING THE MEAL COUNT INFORMATION REQUIRED FOR CLAIMING STUDENTS MEALS. FOOD SERVICE DEPARTMENT WILL PROVIDE CLASS ROSTER WITH THE NAMES OF EVERY STUDENT PARTICIPATING IN THE FIELD TRIP USING THE INFORMATION SUBMITED.TEACHERS NEED TO MARK IN THE CLASS ROSTER THE STUDENT NAME AS REIMBURSABLE MEAL IS HANDED TO THE STUDENT. ORIGINAL CLASS ROSTER MUST BE SUBMITTED TO THE CENTRAL KITCHEN. AT LEAST TWO-WEEK NOTICE IS REQUIRE FOR EACH FIELD TRIP.

TEACHER SIGNATURE(S) EACH TEACHER ATTENDING MUST SIGN

X_____ DATE: _____

X_____ DATE: _____

X_____ DATE: _____

X_____DATE:_____

ATTENTION

PLEASE INITIAL: **(BY INITIALING, YOU ARE STATING THAT YOU HAVE READ AND AGREE TO EACH CONDITION BELOW. THANK YOU)**

_____ TEACHERS ARE RESPONSIBLE FOR PROVIDING LIST OF STUDENTS ATTENDING THE FIELD TRIP

_____ TEACHERS ARE RESPONSIBLE FOR PROVIDING **CLEAN ICE CHESTS**

_____ PLEASE DELIVER ICE CHESTS **NO LATER** THAN **9am** THE **DAY BEFORE** TRIP

_____ ADULT MEALS ARE **NOT** PROVIDED

_____**TEACHERS ARE RESPONSIBLE FOR SENDING BACK THERMOMETHERS AND ORIGINAL CLASS ROSTER WHERE STUDENTS WERE MARK FOR BREAKFAST AND LUNCH**

STUDENT FOOD ALLERGIES: _____
_____ _____

ADDITIONAL INFORMATION: _____