

Hot Lunch Choices



Please fill each individual strip out and send in with your child on the day they are receiving hot lunch.

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|-------------------------|
| Name: _____ Date _____ |
| Hot lunch Choice: _____ |



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|-------------------------|
| Name: _____ Date _____ |
| Hot lunch Choice: _____ |



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|-------------------------|
| Name: _____ Date _____ |
| Hot lunch Choice: _____ |



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|-------------------------|
| Name: _____ Date _____ |
| Hot lunch Choice: _____ |



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|-------------------------|
| Name: _____ Date _____ |
| Hot lunch Choice: _____ |