

Field Trip Meal Request

Please request field trip lui head cook at your site.	nches two (2) weeks befo	ore the trip by	turning in this completed f	orm to cafeteria
School Site:		Today's Date:		
Date of Field Trip:	Meal Pick Up Tim	e:	Teacher/Grade:	
Number of student meals	requested:			
School Meal: *Deli Sandw treat (due to supply chain	issues, meals are subjec		nustard), fruit, vegetable, j	uice/milk/water & a
FIELD TRIP MEAL PROCEDU	RE:			
- Submit this Meal Request returned to you confirming		e site lead cool	< two (2) weeks prior to the	• trip. A copy will be
- Call the lead site cook tv	vo (2) days before trip do	ate to confirm	your order.	
 On the day of the field tr of the students present for trip, the extra meals will be 	the field trip. If the mea	ıls exceed the i		
- Attach a copy of class re Please use a class roster to to the site lead cook as so student(s) received a med Service system from this lis	o <u>check off each child as</u> on as possible <u>after</u> the fall during the field trip. Th	s he/she receiv field trip. This list e site lead coc	<u>res</u> a complete bagged m st is important because it o ok will enter the student(s)	neal. Return the roster confirms the into the Point of
- We will send one extra m please write in the studen				a meal is consumed,
- *Students requiring a spe students who have an ap Services Department. If a accommodations can be	oroved Meal Accommod severe allergy is present	dation Form/Sp	pecial Meal Form on File w	rith the Nutrition
Name of Student(s)/Allerg	y:			
- To cancel an order, call breakfast and \$0.00 per m).00 per meal for
Thank you and safe travel	s!			
(Nutrition Services Departr Date Lunch Request Conf		Site Lead	Cook:	
Lec	d cook: return a copy to	the person wh	no requested the meals fo	r confirmation

This institution is an equal opportunity provider.

Questions: Contact Nutrition Services Director, Callie Barber, cbarber@colusa.k12.ca.us (530) 458-7791 ext: 4040

Revised: 10/2021