

*Breakfast and Lunch Schedule*

Please check the box if your child will receive lunch and/or breakfast.

# Lunch Form

Students Name \_\_\_\_\_

Month        SEPTEMBER        -

Monday	Tuesday	Wednesday	Thursday	Friday
		9/4 Half Day no Lunch	9/5 Half Day no Lunch	9/6 Half Day no Lunch
9/9 <input type="checkbox"/> Breakfast <input type="checkbox"/> Chicken Fingers and fruit	9/10 <input type="checkbox"/> Breakfast <input type="checkbox"/> Macaroni and Cheese	9/11 <input type="checkbox"/> Breakfast <input type="checkbox"/> Maple Waffles	9/12 <input type="checkbox"/> Breakfast <input type="checkbox"/> Pasta and Meatballs with a buttered roll	9/13 <input type="checkbox"/> Breakfast <input type="checkbox"/> Pizza
9/16 <input type="checkbox"/> Breakfast <input type="checkbox"/> Chicken Fingers and fruit	9/17 <input type="checkbox"/> Breakfast <input type="checkbox"/> Macaroni and Cheese	9/18 <input type="checkbox"/> Breakfast <input type="checkbox"/> Maple Waffles	9/19 <input type="checkbox"/> Breakfast <input type="checkbox"/> Pasta and Meatballs with a buttered roll	9/20 <input type="checkbox"/> Breakfast <input type="checkbox"/> Pizza
9/23 <input type="checkbox"/> Breakfast <input type="checkbox"/> Chicken Fingers and fruit	9/24 <input type="checkbox"/> Breakfast <input type="checkbox"/> Macaroni and Cheese	9/25 <input type="checkbox"/> Breakfast <input type="checkbox"/> Maple Waffles	9/25 <input type="checkbox"/> Breakfast <input type="checkbox"/> Pasta and Meatballs with a buttered roll	9/27 <input type="checkbox"/> Breakfast <input type="checkbox"/> Pizza
9/30 <input type="checkbox"/> Breakfast <input type="checkbox"/> Chicken Fingers and				

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