

**Vermilion Elementary School
Lunch Program Society
APRIL 2020 MENU**

Student's Name _____

K 1 2 3 4 5 6 _____ A B
Class (please circle)

Please check your choices on this form and return no later than **3rd Thursday of the month.**

In order to properly plan and organize your child's lunch program, we ask that you please meet the deadline for returning lunch orders. Online ordering is available at ves.hotlunches.net access code is VEHL

		Wednesday, April 1	Thursday, April 2
		Pepperoni Pizza Grilled Cheese Sandwich Veggies/Dip Yogurt	Chicken Burger Caesar Salad Fruit
Tuesday, April 7		Wednesday, April 8	Thursday, April 9
BBQ Chicken Hash brown Veggie Jello		Chicken Strips Rice Veggie Fruit	Hamburger w/ Cheese Caesar Salad Yogurt
Tuesday, April 14		Wednesday, April 15	Thursday, April 16th
No School		No School	No School
Tuesday, April 21		Wednesday, April 22	Thursday, April 23
Meatballs w/ Mushroom Sauce Hash brown Veggie Yogurt		Ham Cheese Pizza Caesar Salad Fruit	Grilled Cheese Raw Veggies Dip Yogurt
Tuesday, April 28		Wednesday April 29	Thursday April 30
Taco Salad Garlic Toast Yogurt *Contains Pork		Ham/Cheese/Lettuce Sub Coleslaw Yogurt	Roast Beef Mashed potato Gravy Veggie

The cost is \$4.50 per meal. For a quick calculation, see the payment chart at the right.

Make cheques payable to V.E.S. Lunch Program Society. Cheques will be cashed at the start of the month. Although we require a signed sheet for each child, you may combine payments & return all sheets in one envelope. **Although the School Lunch Program Society does not anticipate any changes in the menu, circumstances may arise, and substitutions may have to be made. No refunds will be made for menu changes or for students that are absent.*

Payment Chart	
1 meal =	\$4.50
2 meals =	\$9.00
3 meals =	\$13.50
4 meals =	\$18.00
5 meals =	\$22.50
6 meals =	\$27.00
7 meals =	\$31.50
8 meals =	\$36.00
9 meals =	\$40.50
10 meals =	\$45.00
11 meals =	\$49.50
12 meals =	\$54.00
13 meals =	\$58.50
14 meals =	\$63.00
15 meals =	\$67.50

	Unit Cost	# Units	Total \$
Total Number of Meals:	\$4.50 Each		
Milk Tickets:	\$1.50 Each		
Total Cost:			
Parent Signature:	Date:		
Parent Email:			

**** By Signing above you acknowledge that they have read through and agree to the terms outlined in this document****