

Due: April 30th

Lunch Menu May 2019

Crosspoint Children's Center

Monday	Tuesday	Wednesday	Thursday	Friday
		1 st Ham and Cheese Sandwich on Wheat Chips. Apple Sauce Carrot Sticks w/ Ranch	2 nd Hot dog Chips Cooked Corn Pears	3 rd Taqitos w/guacamole Spanish Rice Tropical Fruit
6 th Cheese Pizza Green Beans Mandarin Oranges	7 th Turkey and Cheese Sandwich on Wheat Chips Carrot Sticks w/ranch Diced Peaches	8 th Spaghetti w/ Marinara Sauce. Green Salad Dinner Roll	9 th Bean & Cheese Burrito Spanish Rice Cooked Corn Tropical Fruit	10 th Chicken Patty on a Bun Peas Fruit Cocktail
13 th Grilled Cheese Sandwich Chips Green Beans Orange slices	14 th Canadian Bacon Pizza Carrot Sticks w/ranch Pineapple Chunks	15 th Macaroni and Cheese Cooked Carrots Apple Sauce	16 th Hawaiian Meatballs w/Rice Cooked Corn Fruit Cocktail	17 th Chicken Nuggets Tater Tots Peas Diced Peaches
20 th Hot Dog Chips Green Beans Apple Sauce	21 st Macaroni and Cheese Peas Fruit Cocktail	22 nd Cheese Pizza Green Salad Diced Peaches	23 rd Ham Cheese Sandwich Chips Cooked Carrots Apple Sauce	24 th Baked Corn dog Tater Tots Cooked Corn Pears
27 th School Closed Memorial Day	28 th Spaghetti w/Marinara Green salad Dinner Rolls	29 th Turkey and Cheese Sandwich on Wheat Chips Green Beans Diced Peaches	30 th Canadian Bacon Pizza Cooked Corn Tropical Fruit	31 st Cheese Quesadilla Spanish Rice Peas Pears

ALL MEALS INCLUDE MILK

PAYMENT:	<i>Pre-paid lunches are \$5.00 Please make check payable to CrossPoint Children's Center (or charge to account) and include it with your order form. Return to the school office by April 30th 2019. Emergency lunches are \$6.00</i>
CHECKS:	<i>There will be a \$25 service fee plus late fees on returned checks.</i>
ABSENCE & CREDIT:	<i>If your child will be absent, please call CrossPoint Children's Center at 909-902-1154 to request credit. YOU MUST CALL BEFORE 10:00 AM the morning of the absence. No exceptions will be made. Credit(s) can be used for a later date.</i>

Due: Tuesday April 30th 2019 (Cut here and return bottom portion with payment)

ONE ORDER FORM PER CHILD PLEASE

****Order Form****

CHILD'S NAME: _____

PHONE NUMBER: _____

TEACHER'S NAME: _____

ROOM: _____

PLEASE CIRCLE THE DATES THAT YOU WILL PREPAY.

M	T	W	Th	F	M	T	W	Th	F	M	T	W	Th	F	M	T	W	Th	F	M	T	W	Th	F
		1	2	3	6	7	8	9	10	13	14	15	16	17	20	21	22	23	24		28	29	30	31

1- \$5.00	2- \$10.00	3- \$15.00	4- \$20.00	5- \$25.00	6- \$30.00	7- \$35.00	8- \$40.00	9- \$45.00	10- \$50.00	11- \$55.00
12- \$60.00	13- \$65.00	14- \$70.00	15- \$75.00	16- \$80.00	17- \$85.00	18- \$90.00	19- \$95.00	20- \$100.00	21- \$105.00	22- \$110.00

CHARGE ACCT: _____ CASH _____ CHECK #: _____ AMOUNT: _____

DATE: _____

PLEASE KEEP THE MENU FOR REFERENCE