

(Bring completed form for meals)

For office use: Amt. received \_\_\_\_\_ recd by \_\_\_\_\_

### Mid-Del Virtual 5 day Pick-up Meals (Breakfast/Lunch) Confirmation Form

(Pick-up is at the high school that serves your neighborhood)

Date: \_\_\_\_\_

Pick-up school: \_\_\_\_\_  
(High School Name)

Initial below

\_\_\_\_\_ I understand the meals I receive today will be charged to my child’s meal account according to the current eligibility status.

\_\_\_\_\_ I also understand that I can only get one meal per student per day unless full price is paid for additional meals.

\_\_\_\_\_ I agree to pay any balance if my student’s account is insufficient to cover these meals.  
(Weekly cost is Elem: 20.75, Middle/High school is \$22.25).

Parent’s Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Name (List Student Names)	Student Lunch ID (ask your child for this number)	School	Birth date
<b>List visitor below (any non-enrolled person) Cost for week is \$30.00</b>			

This institution is an equal opportunity provider

Future Order for meals (circle to confirm pick-up): **next week**

Bring this completed form to get meals