



Red Clay School District
Child Nutrition Services
Field Trip Notification Form



The following forms should be completed and returned to the Cafeteria Manager. These forms are necessary to inform the cafeteria your class will not be eating in the cafeteria this day and to assure your students a lunch for the field trip if needed. Complete this form online seven (7) days before the trip. Print a classroom roster from E-school or retrieve a classroom roster with allergies listed from the cafeteria staff. Use the class roster and check off all students who are in attendance and receiving a meal the day of the field trip. Return the completed classroom roster to the cafeteria the morning of the field trip when picking up the lunches. **The completed roster is required prior to the exchange of the meals per federal regulations to indicate which students received a reimbursable meal.**

PLEASE SEND TO THE CAFETERIA **SEVEN (7) CALENDAR DAYS BEFORE THE TRIP** (*No guaranteed meal service for field trips without seven calendar days' notice due to the preparation time needed to ensure all food items are ordered for student meals that are compliant with the USDA regulations*).

Date of Trip: _____ Room # : _____

Teacher: _____ # Of Total Lunches Needed: _____ (types noted below)

Pick Up Time: _____ # Of Special Allergy Lunches Needed: _____ (see below)

Meals are required to be transported in insulated coolers. Schools will be responsible for providing coolers. If coolers are needed, the cafeteria may be able to supply a limited amount as available.

TYPES OF LUNCHES OFFERED:

NUMBER NEEDED

- DELI SANDWICH (TURKEY OR HAM) WITH CHEESE _____
- PB&J JAMWICH PACK (ALSO INCLUDES GRAHAM & CHZ STICK) _____
- LUNCHABLE (YOGURT, CHZ STICK, GRAHAM OR GOLDFISH) _____

CHOICE OF ONE FRUIT AND ONE VEGETABLE WILL BE GIVEN WITH EACH LUNCH ABOVE:

- FRESH WHOLE FRUIT _____
- OR
- BAGGED APPLES _____
- BAGGED RAW CARROTS _____

CHOICE OF TWO KINDS PER CLASS – (ONE MILK PER STUDENT LUNCH)

- LOW-FAT WHITE _____
- NON-FAT WHITE _____
- NON-FAT STRAWBERRY _____
- NON-FAT CHOCOLATE _____
- LACTAID OR SOY MILK (SPECIFY) _____

SPECIAL ALLERGEN-FREE MEALS* _____

**(DOES NOT PERTAIN TO PEANUT/TREE NUT, FISH, OR SHELLFISH)*

ANY CHANGES FROM THE ABOVE MEAL COUNTS MUST BE SENT TO THE CAFETERIA 24 HOURS IN ADVANCE OF THE TRIP.

- Additional Information: _____
