

SY 22-23 Birthday Celebration Order Form

To celebrate your child's birthday, you may purchase frozen dessert treats for your child's classroom. Please complete this form and send it to your child's cafeteria at least three days in advance with your payment. You may also call the cafeteria manager to make arrangements. If ordering by phone, the payment for the frozen desserts will be deducted from your child's lunch account.

Please fill out the information below:

| | |
|------------------------|--------------------------|
| Student's Name: _____ | Student's Teacher: _____ |
| Student's Grade: _____ | Celebration Date: _____ |
| Parent's Name: _____ | Phone Number: _____ |

Please complete order below:

| Frozen Novelty | Individual Price | Quantity | Total Price |
|---|------------------|----------|-------------|
| Dessert Cups: Vanilla, Chocolate, | \$1.25 | | |
| Sherbert Cups: Orange, Lemon, or Raspberry | \$1.25 | | |
| Scooter Crunch Bar: Strawberry or Chocolate | \$1.25 | | |
| Vanilla Ice Cream Sandwich | \$1.25 | | |
| Polar Blast Fruit Punch Bar | \$1.25 | | |
| | \$1.25 | | |
| Cookies & Cream Cone | \$1.25 | | |
| | | | |
| | | | |
| Total Due: | | | |

Please select form of payment:

- Check Number: _____ Check Amount: _____
- Please deduct payment from my child's meal account.

| | |
|--------------------|-------|
| _____ | _____ |
| Parent's Signature | Date |

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