



# MSAD 75 - High School & Middle School Field Trip Lunch Form



Student's Name: \_\_\_\_\_  
Please Print

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

Teacher's Name: \_\_\_\_\_

Grade: \_\_\_\_\_

Departure Time: \_\_\_\_\_

Going To: \_\_\_\_\_

Please check the appropriate boxes below and return this form by: \_\_\_\_\_



- NO**, my child does NOT need a lunch from the cafeteria for this trip. I will provide a lunch for my child.
- YES**, my child would like a bagged lunch from the cafeteria. **ALL MEALS ARE FREE.**

**If YES, please select at least 2 items from the boxes below, (1 must be a fruit or veggie), but you may choose as many as 3 items from the following list for their bagged lunch.**




Choose 1 Sandwich option:

**Peanut Butter & Jelly**   **Cheese**   **Ham & Cheese**

Choose 1 Milk option:

**1% White Milk**   **Skim Chocolate Milk** 

Choose up to 3 items, but you MUST select at least 2 of the items in this box:

**Fresh Fruit**   **100% Fruit Juice Box**   **Vegetable** 

**\*\*or\*\***

**Please add a snack to the lunch bag. (No charge.)**

**Please add a bottle of water for a charge of \$1.50.**

**Please note that my child has food allergies, and the school nurse has an Allergy Action Plan for my child that needs to be followed. Please ensure my student's meal contains NO:**

**Gluten**     **Peanuts**     **Tree Nuts**     **Egg**     **Dairy**

**Other, please explain**

I give the school cafeteria permission to prepare a bagged lunch for my child per my selections above for this field trip.

\_\_\_\_\_  
Parent's Signature

Please return this form with the field trip permission slip.  
Teachers, please send your slips to the Cafeteria **no later than 1 week** prior to your trip.