

FIELD TRIP MEALS

Site/Classroom(s) _____ Today's Date _____

Contact Person _____ Contact Number _____

Date of Event _____ Number of people attending _____

***Mark which meals are needed**

BREAKFAST

Serving per participant

Fruit

½ cup, varies

Crackers or Cereal

½ oz eq.

LUNCH

Fruit

¼ cup, varies

Sunbutter

3 T

Bread

½ oz eq.

Vegetable

¼ cup, varies

SNACK

Fruit

½ cup, varies

Crackers

½ oz eq.

PAPER

Plates

Site provides

5 oz. Cups

Site provides

Napkins

Site provides

Garbage bag

Site provides

Cooler

Site provides

Gloves

Site provides

Please fax or Email to Food Service two weeks in advance of delivery.

Food Office # 275-3700

Fax # 298-2588

Email krobinson@reachdane.org