

Please return this form to your school's cafeteria with your deposit in a sealed envelope marked with your child's name and grade.

Student's Name: _____ **Grade:** _____

Amount Enclosed: \$ _____

Method of Payment: (check one) **Cash** **Check** **Money Order**

Checks should be made out to "HHH School Lunch Fund".

PLEASE SEND A SEPARATE CHECK FOR EACH CHILD.

Deposit Allocation: (check one)

Pre-paid Lunches Only **Snacks & Lunches**