

Lonoke School District



Child Nutrition Services

“Lunch To Go”

Thank you for allowing us to serve your students a “Lunch To Go” on their special outing. We appreciate the 2 week notice you are giving us in order to better serve you. Be safe and have a great trip!

Today’s Date _____

Date of Field Trip _____

(Don’t forget the 2 week notice)

Grade Level _____

Class Teacher’s Name _____

Time Order Will Be Picked Up _____

Please list names of students ordering a lunch

(Student’s accounts will be posted at time of pickup)

Please return this form to the cafeteria manager at your school