

**Nutri-Serve Food Management
Food Service Department
Saint Mary's School**

Dear Parents/Guardians,

Nutri-Serve would like to inform you of our prepayment program. This program is to allow you to put money into your child's account. This payment option will speed up your child's service and enable you to monitor his or her purchases. Prepayments are available in the following increments:

5 days for \$13.75 10 days for \$27.50 20 days for \$55.00

Please note the price of lunch is \$2.75

Prepayments are put into your child's account. It is one account for both lunch and snack. **If you prefer your child to NOT purchase snack, please note this on the form below. Also, you can request to limit your child's snack, by stressing how much your child can spend per day. This limit can be put directly on the account.**

Thank you for your cooperation and assistance. If you have any concerns, please contact the kitchen at 629-6419. Please make checks payable to **St. Mary's School Cafeteria.**

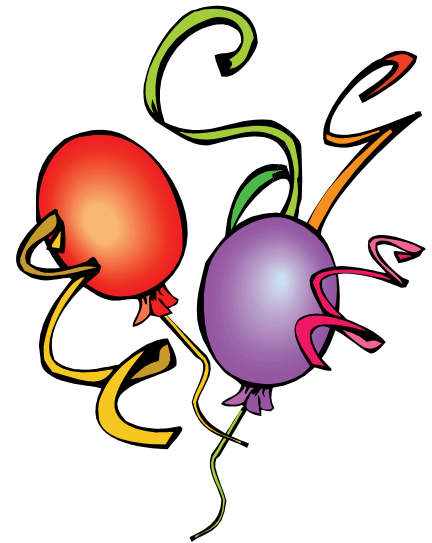
Name: _____ Date: _____

Room: _____

5 days \$13.75 _____ 10 days \$27.50 _____ 20 days \$55.00 _____

Please make checks payable to St. Mary's School Cafeteria.

**St Mary's
Williamstown**



Celebrate Your Child's Birthday!

Nutri-Serve Food Management would like to help serve a healthy snack for your child's birthday. You can purchase a "BIRTHDAY TREAT" for your child, teacher and classmates.

Our cafeteria will provide each student in your child's class with one of the snacks below:

Please circle your snack choice

1. Soft Pretzel for \$.75 each
2. Popcorn bag for \$.75 each
3. Ice Cream for \$ 1.00 each
4. Special Request (please discuss with Cafeteria Staff

100% Fruit Juice or Milk may also be purchased for \$.60 each)

You have the opportunity to choose the birthday treat for your child's class. In addition, the birthday child will receive a birthday surprise from the "Birthday Box". All snacks will be delivered to your child either in their classroom or cafeteria(per teacher instructions).

Please contact: Debbie Spasari at: smw@nsfm or call 856-629-6419

Please enclose payment with order.

ORDER FORM

PLEASE RETURN TO THE CAFETERIA AT LEAST 48 HOURS BEFORE THE PARTY DATE

Student's Name_____

Celebration Date_____

Grade_____Teacher_____

Parents Phone number_____

Number of Snacks_____X \$ ____ each = amount due \$_____