

Hot School Lunch Order Form

Weekly

Week Commencing:

Child's Name: _____ Class: _____

Allergies: _____

Enclosed £ _____ (£11.00 for full week)

Cheques made payable to **Lincolnshire County Council** please.

Please return by 12 midday on Thursday Prior to week of meals.

Please send me a receipt _____

Signed: _____

