



LaRue County Nutrition Services

FIELD TRIP REQUEST FORM

Date of Request: _____

Teacher/Grade: _____

TO: CHILD NUTRITION MANAGER (At school level)

Our class is planning a field trip! We request you provide lunches as follows:

Date of Field Trip: _____

Number of Total Lunches: _____

Ham Subs: _____

PB&J: _____

White Milk: _____

Chocolate Milk: _____

Strawberry Milk: _____

TIME FOR LUNCH PICKUP: _____

Teacher Signature: _____

***A Point of Service Roster of students that is checked off at the field trip site showing which students received the meals must be returned to the manager upon return!*

TWO WEEKS NOTICE IS REQUIRED!!!



TEACHERS!

STUDENTS!

STAFF!

ENJOY A SUPER SACK

TAKE IT ON A FIELD TRIP!
STAYS NEAT UNTIL YOU EAT!
HAS EVERYTHING YOU NEED FOR A TASTY, NUTRITIOUS LUNCH!

MENU CHOICES:

Choice of Ham & Cheese on Fresh Baked Sub Bun (OR)
PB&J: _____

Tostitos and Salsa Cup
Whole Apples
Dragon Punch Juice

Choice of Milk: _____
(White, Chocolate, Strawberry)

Student Name: _____

Homeroom Teacher: _____

Choice of Milk (List milk choices by category on front form)