



# St. John's EPISCOPAL SCHOOL

Office Use:
Name _____
Check No.: _____
PMOF: _____
Amt. Pd. _____
Date: _____

Monday through Thursday School Lunch Program  
 Provided by FRESH MEALS formerly Lemon Slice Catering  
 September 3, 2019 through June 9, 2020

Please complete and return this form no later than Friday, August 29, 2019

### Payment Options:

**One Payment: \$1250 DUE September 20, 2019**

Paid directly to St. John's for September 3 through June 9 lunch period.

Check here to use your current Preferred Payment Method on File

**Two Payments: Paid through FACTS only.**

First payment of \$635 due October, 2019. Second payment of \$635 due January, 2020.

**Nine Monthly Payments: Paid through FACTS only. \$160 per month**

beginning October, 2019 through May, 2020

Please enroll the following student(s) in the school's Lemon Slice Lunch Program from September 3, 2019 through June 9, 2020

### Student Name:

- |           |               |
|-----------|---------------|
| <b>1:</b> | <b>Grade:</b> |
| <b>2:</b> | <b>Grade:</b> |
| <b>3:</b> | <b>Grade:</b> |

Part II: Allergy Students Only	
Student Name: _____	Grade: _____ Allergy: _____
Parent Signature: _____	Date: _____

*Fridays will be a fundraising lunch for school programs. To participate, please refer to the Fundraiser Friday Form.*