

****PLEASE PUT YOUR
CHILD'S NAME ON THE
LUNCH SHEET.**

CHILD'S

March 2024

NAME: _____

PPCA / ASC Extended Day / K3 & K4

Monday	Tuesday	Wednesday	Thursday	Friday
				1 <input type="checkbox"/> Hot Lunch <input type="checkbox"/> Chicken & Fries <input type="checkbox"/> White Milk <input type="checkbox"/> Choc. Milk <input type="checkbox"/> Juice <input type="checkbox"/> Water
4 <input type="checkbox"/> Hot Lunch <input type="checkbox"/> Chicken & Fries <input type="checkbox"/> White Milk <input type="checkbox"/> Choc. Milk <input type="checkbox"/> Juice <input type="checkbox"/> Water	5 <input type="checkbox"/> Hot Lunch <input type="checkbox"/> Chicken & Fries <input type="checkbox"/> White Milk <input type="checkbox"/> Choc. Milk <input type="checkbox"/> Juice <input type="checkbox"/> Water	6 <input type="checkbox"/> Hot Lunch <input type="checkbox"/> Chicken & Fries <input type="checkbox"/> White Milk <input type="checkbox"/> Choc. Milk <input type="checkbox"/> Juice <input type="checkbox"/> Water	7 <input type="checkbox"/> Hot Lunch <input type="checkbox"/> Chicken & Fries <input type="checkbox"/> White Milk <input type="checkbox"/> Choc. Milk <input type="checkbox"/> Juice <input type="checkbox"/> Water	8 Crusader Care only <input type="checkbox"/> Hot Lunch <input type="checkbox"/> Lunch Box <input type="checkbox"/> Absent/No Lunch <input type="checkbox"/> White Milk <input type="checkbox"/> Choc. Milk <input type="checkbox"/> Juice <input type="checkbox"/> Water
11 Crusader Care only <input type="checkbox"/> Hot Lunch <input type="checkbox"/> Lunch Box <input type="checkbox"/> Absent/No Lunch <input type="checkbox"/> White Milk <input type="checkbox"/> Choc. Milk <input type="checkbox"/> Juice <input type="checkbox"/> Water	12 Crusader Care only <input type="checkbox"/> Hot Lunch <input type="checkbox"/> Lunch Box <input type="checkbox"/> Absent/No Lunch <input type="checkbox"/> White Milk <input type="checkbox"/> Choc. Milk <input type="checkbox"/> Juice <input type="checkbox"/> Water	13 Crusader Care only <input type="checkbox"/> Hot Lunch <input type="checkbox"/> Lunch Box <input type="checkbox"/> Absent/No Lunch <input type="checkbox"/> White Milk <input type="checkbox"/> Choc. Milk <input type="checkbox"/> Juice <input type="checkbox"/> Water	14 Crusader Care only <input type="checkbox"/> Hot Lunch <input type="checkbox"/> Lunch Box <input type="checkbox"/> Absent/No Lunch <input type="checkbox"/> White Milk <input type="checkbox"/> Choc. Milk <input type="checkbox"/> Juice <input type="checkbox"/> Water	15 Crusader Care only <input type="checkbox"/> Hot Lunch <input type="checkbox"/> Lunch Box <input type="checkbox"/> Absent/No Lunch <input type="checkbox"/> White Milk <input type="checkbox"/> Choc. Milk <input type="checkbox"/> Juice <input type="checkbox"/> Water
18 <input type="checkbox"/> Hot Lunch <input type="checkbox"/> Chicken & Fries <input type="checkbox"/> White Milk <input type="checkbox"/> Choc. Milk <input type="checkbox"/> Juice <input type="checkbox"/> Water	19 <input type="checkbox"/> Hot Lunch <input type="checkbox"/> Chicken & Fries <input type="checkbox"/> White Milk <input type="checkbox"/> Choc. Milk <input type="checkbox"/> Juice <input type="checkbox"/> Water	20 <input type="checkbox"/> Hot Lunch <input type="checkbox"/> Chicken & Fries <input type="checkbox"/> White Milk <input type="checkbox"/> Choc. Milk <input type="checkbox"/> Juice <input type="checkbox"/> Water	21 <input type="checkbox"/> Hot Lunch <input type="checkbox"/> Chicken & Fries <input type="checkbox"/> White Milk <input type="checkbox"/> Choc. Milk <input type="checkbox"/> Juice <input type="checkbox"/> Water	22 <input type="checkbox"/> Hot Lunch <input type="checkbox"/> Chicken & Fries <input type="checkbox"/> White Milk <input type="checkbox"/> Choc. Milk <input type="checkbox"/> Juice <input type="checkbox"/> Water
25 <input type="checkbox"/> Hot Lunch <input type="checkbox"/> Chicken & Fries <input type="checkbox"/> White Milk <input type="checkbox"/> Choc. Milk <input type="checkbox"/> Juice <input type="checkbox"/> Water	26 <input type="checkbox"/> Hot Lunch <input type="checkbox"/> Chicken & Fries <input type="checkbox"/> White Milk <input type="checkbox"/> Choc. Milk <input type="checkbox"/> Juice <input type="checkbox"/> Water	27 <input type="checkbox"/> Hot Lunch <input type="checkbox"/> Chicken & Fries <input type="checkbox"/> White Milk <input type="checkbox"/> Choc. Milk <input type="checkbox"/> Juice <input type="checkbox"/> Water	28 <input type="checkbox"/> Hot Lunch <input type="checkbox"/> Chicken & Fries <input type="checkbox"/> White Milk <input type="checkbox"/> Choc. Milk <input type="checkbox"/> Juice <input type="checkbox"/> Water	29 PPCA AND CRUSADER CARE CLOSED. EASTER HOLIDAY

*** PLEASE SEE THE ATTACHED SHEET FOR THE HOT LUNCH MENU.**

IF THERE IS NO CHOICE MADE, YOUR CHILD WILL EAT HOT LUNCH.

IF THERE IS NO CHOICE MADE FOR A DRINK, YOUR CHILD WILL DRINK WATER.