



Meal preference form

Child's Name

Class

Please indicate your child's current preference

School lunch (5 days)

Packed lunch (5 days)

If your child has a mixture of both, please indicate their current pattern below.

M	T	W	T	F

Starting on I would like to change my child's preference to the following:

School lunch (5 days)

Packed lunch (5 days)

School lunch

M	T	W	T	F