

Starkville Christian School

303 Lynn Lane ♦ Starkville, MS 39759 ♦ Telephone (662) 323-7453

August 3, 2011

Dear Parents:

Please mark your lunch choices for the week of _____. We will need orders and payment (**make checks payable to Starkville Christian School**) *no later than Friday* of each week ***Lunch checks must be separate from tuition/aftercare payments.***

The menu will be handed out monthly and is also available online. Drinks and homemade dessert will be served with each meal. The price will be \$4.50 each. Please indicate which meals you are selecting and attach payment. A separate form is required for each student. Parents if you are eating with your child, please indicate it (on one form) as well.

Monday: main meal ____ alternative meal ____ or bring lunch from home ____

Tuesday: main meal ____ alternative meal ____ or bring lunch from home ____

Wednesday: main meal ____ alternative meal ____ or bring lunch from home ____

Thursday: main meal ____ alternative meal ____ or bring lunch from home ____

Friday: main meal ____ alternative meal ____ or bring lunch from home ____

Thank you!

Lynn S. Witbeck
Business Manager

Name

Teacher/grade