

NAME: _____

CELL PHONE #: _____

Email Address: _____@live.kutztown.edu Card Number: _____

REASON FOR MEAL REQUEST: (Please mark one)

☐ Student Teacher

☐ Class Field Trip

☐ Internship

PICKUP DAY AND TIME: ☐ Day Prior (SDH First Floor between 6pm and 9pm) ☐ Day Of (SDH First Floor 7:00am)

BREAKFAST – Circle two items for the days you need a bagged meal (includes bottle of orange juice)

Monday	Tuesday	Wednesday	Thursday	Friday
Not Needed	Not Needed	Not Needed	Not Needed	Not Needed
Bagel and Cream Cheese	Bagel and Cream Cheese	Bagel and Cream Cheese	Bagel and Cream Cheese	Bagel and Cream Cheese
Granola Bar	Granola Bar	Granola Bar	Granola Bar	Granola Bar
Muffin	Muffin	Muffin	Muffin	Muffin
Fresh Fruit Cup	Fresh Fruit Cup	Fresh Fruit Cup	Fresh Fruit Cup	Fresh Fruit Cup
Sausage, Egg & Cheese Bagel	Sausage, Egg & Cheese Bagel	Sausage, Egg & Cheese Bagel	Sausage, Egg & Cheese Bagel	Sausage, Egg & Cheese Bagel

LUNCH – Circle One item for the days you need a bagged meal (includes whole fruit, chips, and dessert)

Monday	Tuesday	Wednesday	Thursday	Friday
Not Needed	Not Needed	Not Needed	Not Needed	Not Needed
Turkey and Cheddar	Turkey and Cheddar	Turkey and Cheddar	Turkey and Cheddar	Turkey and Cheddar
Ham and Cheese	Ham and Cheese	Ham and Cheese	Ham and Cheese	Ham and Cheese
Tuna Salad	Tuna Salad	Tuna Salad	Tuna Salad	Tuna Salad
Peanut Butter & Jelly	Peanut Butter & Jelly	Peanut Butter & Jelly	Peanut Butter & Jelly	Peanut Butter & Jelly
Three Cheese (vegetarian)	Three Cheese (vegetarian)	Three Cheese (vegetarian)	Three Cheese (vegetarian)	Three Cheese (vegetarian)
Garden Salad (vegan) Dressing:	Garden Salad (vegan) Dressing:	Garden Salad (vegan) Dressing:	Garden Salad (vegan) Dressing:	Garden Salad (vegan) Dressing:

PLEASE READ- Once you have completed this form, you will need to rename the file email it as an attachment to: **gerber-erica@aramark.com**. Orders should be sent each Friday for the next week.