

Pizza Hut Pizza Party

FSD Nutrition Services Order Form

1. Please complete this form and email it to amanda_colon@fsd.k12.ca.us

at least **1 WEEK** in advance of party.

A confirmation will be returned.

2. Pizza Party Information:

A. Meal includes one slice of pizza, fruit and/or salad, dessert, and milk.

B. Party times must be prior to the end of the lunch period.

3. Must fax a class roster of students participating to 447-7425

1 week in advance of party.

4. Pick up at the school cafeteria on day of event.

Today's Date: _____

Party Date: _____

School: _____

Teacher: _____

Serving Time: _____

Grade: _____ RM: _____

Quantity of Student Meals: Pepperoni: _____ Cheese: _____

Extra Pizzas at \$9.00 ea:
10 Slices Per Pizza _____

Quantity of Adult Meals @ \$3.75 each: _____

Pepperoni: _____

Quantity of Adult Meal without Milk @ \$3.50 each: _____

Cheese: _____

Adult Meals include one slice of pizza, fruit and/or vegetable, and dessert

5. Payment Information

Please select **ONE** of the following methods of payment:

1. Teacher /Organization Fund Payment: _____ Budget Number: _____

2. Teacher/Organization Cash/Check Payment: _____ Check #: _____

3. Use Students' Meal Accounts for entire payment:

Signature (Required): _____

Print Name: _____

For Nutrition Center Use Only

School: _____

Roster Included: Yes No

Date: _____

Adults: @ \$3.75

Eligibility: _____

Adults w/out Milk: @ \$3.50

N: _____

Extra Pizzas: @ \$9.00

S: _____

A: _____

Total Amount Due: \$

Cash or Check Received: Yes No

Entered/Verified By: _____