



**SECONDARY SCHOOLS OPT OUT OF ALA CARTE**

**PLEASE MAKE A NOTE ON MY STUDENT:** \_\_\_\_\_

STUDENT'S FULL NAME

**LUNCH ACCOUNT THAT THEY ARE NOT TO PURCHASE ALA CARTE ITEMS. I UNDERSTAND THAT THE NUTRITION STAFF WILL DO THEIR BEST TO ENFORCE THIS REQUEST BUT SOMETIMES THE PURCHASE OF ALA CARTE ITEMS MAY HAPPEN.**

**SIGNATURE OF PARENT OR GUARDIAN:**

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