

LA FERIA INDEPENDENT SCHOOL DISTRICT



**Child Nutrition Program Field Trip Form**

2017-2018

Submit field trip form to cafeteria manager

**10 DAYS IN ADVANCE** of scheduled trip

Date of request: \_\_\_\_\_

Date of field trip: \_\_\_\_\_

Destination: \_\_\_\_\_

Time departing: \_\_\_\_\_

Number of students: \_\_\_\_\_

Special diet students: (attach names): \_\_\_\_\_

Number of adults requesting meal \$ 2.50 breakfast/ lunch \$3.50: \_\_\_\_\_

Total student meals being requested: \_\_\_\_\_ breakfast \_\_\_\_\_ lunch \_\_\_\_\_

Total milks: \_\_\_\_\_ Total chocolate milks: \_\_\_\_\_

Person making request: \_\_\_\_\_

Teacher must furnish ice chests for transporting milk.

Teacher must list the names of all students receiving a sack lunch (see attached)

**Menu: Menu is subject to change due to food availability**

**Breakfast**

Fruit Tarts (2) **or**

PB & J Uncrustable & Cheese Stick

Fresh Veggies w/ Dressing

Assorted Juice & Fruit

Assorted Milk

**Lunch**

Deli Sandwich **or**

PB & J Uncrustable & Cheese Stick

(1/2C carrots & 1/4C celery)

Baked chips / Fresh Fruit

Assorted Milk & Condiments

La Feria Independent School District

Child Nutrition Program 2017-2018

**Field Trip Roster**

Teacher: \_\_\_\_\_

Room#: \_\_\_\_\_

Date: \_\_\_\_\_

#Students Present: \_\_\_\_\_

Name	Meal	Milk	Comments
1.			
2.			
3.			
4.			
5.			
6.			
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30.			

Teacher Signature \_\_\_\_\_