



1235 Oak Street • Winnetka, IL 60093  
 phone 847-446-9400 • fax 847-446-9408

<b>For Office Use Only:</b> <input type="checkbox"/> Supervision Only <input type="checkbox"/> Supervision & Milk <input type="checkbox"/> Supervision & Juice
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**ELEMENTARY SCHOOL LUNCH PROGRAM 2011-2012**

The following fee schedule has been established for the elementary school lunch program. The program is available to you child/ren on an annual basis with or without milk or juice. Families who elect to have their children eat at home may use the program on an occasional basis and pay the daily fee.

	<u>Supervision Only</u>	<u>Supervision &amp; Milk</u>	<u>Supervision &amp; Juice</u>
5 days per week	\$235.00	\$329.00	\$431.00
4 days per week	194.00	271.00	355.00
3 days per week	155.00	212.00	275.00
2 days per week	114.00	152.00	194.00
1 day per week	74.00	93.00	114.00

Child/ren Name(s) School (circle) CI GR HW	Grade	Number of Days Per Week	Day(s) Participating (circle)	Amount enclosed for (circle) supervision only & milk & juice
			M T W Th F	\$
			M T W Th F	
			M T W Th F	

PARENT'S NAME: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

In case of emergency at lunchtime, parents can be reached at:

FATHER: \_\_\_\_\_ MOTHER: \_\_\_\_\_

If parents are unavailable, a responsible adult can be reached at:

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

Health problems you may wish to call to the attention of the lunchroom supervisor.

\_\_\_\_\_

Physician's Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

If transportation is needed for the child in case of illness or injury, we agree that he/she may be transported by private car or in a commercial vehicle.

\_\_\_\_\_  
 Parent's Signature

Please return this form along with a check for the appropriate fee to the Winnetka Public Schools, Lunch Program, 1235 Oak Street, Winnetka, Illinois 60093. Make check payable to the Winnetka Public Schools.

**PLEASE DO NOT INCLUDE THIS FEE IN YOUR BUS OR ACTIVITY FEES CHECK**