

ESU DINING Bagged Lunch Form
 PLEASE FILL OUT THIS FORM COMPLETELY
THIS FORM IS ONLY FOR FUTURE MEALS

STUDENT NAME (PRINT): _____
 Last SIX Numbers on E-CARD: _____

MEAL DATE: _____

Circle Meal to be Taken:

Breakfast

Lunch

Dinner

MEAL OPTIONS (Choose ONE):		
<input type="checkbox"/> Any Salad	<input type="checkbox"/> Fruit Cup	<input type="checkbox"/> Vegetables w/dip
<input type="checkbox"/> Sandwich	<input type="checkbox"/> Bagel	<input type="checkbox"/> Pepperoni w/cheese
<input type="checkbox"/> Breakfast Sandwich	<input type="checkbox"/> Apples w/cheese	
<input type="checkbox"/> Yogurt Parfait	<input type="checkbox"/> Apples w/peanut butter	

BEVERAGES (Choose ONE):
<input type="checkbox"/> Bottled Water (16.9 oz)
<input type="checkbox"/> Carton Beverage

Each Meal Also Includes:
One Piece of Fruit
One Small Bag of Chips

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