



CAMP LUNCH ORDER FORM
\$6.50 inc. tax (EXACT CHANGE ONLY)

All lunches include one entrée, two sides, and a beverage.
 Camp Lunches are not available on Field Trip days.

Camper's Name: _____
 Parent/Contact Name: _____ Phone: _____
 Camp Grade (check): ___ K-1st Grade ___ 2nd -5th Grade ___ 6th – 8th Grade ___
 Camp Title: _____ Camp Days: _____

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
ENTRÉE (check 1)	ENTRÉE (check 1)	ENTRÉE (check 1)	ENTRÉE (check 1)	ENTRÉE (check 1)
<input type="checkbox"/> Hamburger	<input type="checkbox"/> PB & J	<input type="checkbox"/> Hamburger	<input type="checkbox"/> PB & J	<input type="checkbox"/> Hamburger
<input type="checkbox"/> Hotdog	<input type="checkbox"/> 6 pc Chicken Nuggets	<input type="checkbox"/> Hotdog	<input type="checkbox"/> 6 pc Chicken Nuggets	<input type="checkbox"/> Hot dog
<input type="checkbox"/> 2 Bagels & Cream Cheese	<input type="checkbox"/> Hamburger	<input type="checkbox"/> 2 Bagels & Cream Cheese	<input type="checkbox"/> Hamburger	<input type="checkbox"/> 2 Bagels & Cream Cheese
SIDES (check 2)	SIDES (check 2)	SIDES (check 2)	SIDES (check 2)	SIDES (check 2)
<input type="checkbox"/> Potato Chips	<input type="checkbox"/> Potato Chips	<input type="checkbox"/> Potato Chips	<input type="checkbox"/> Potato Chips	<input type="checkbox"/> Potato Chips
<input type="checkbox"/> Fruit Cup	<input type="checkbox"/> Fruit Cup	<input type="checkbox"/> Fruit Cup	<input type="checkbox"/> Fruit Cup	<input type="checkbox"/> Fruit Cup
<input type="checkbox"/> Apple Sauce	<input type="checkbox"/> Apple Sauce	<input type="checkbox"/> Apple Sauce	<input type="checkbox"/> Apple Sauce	<input type="checkbox"/> Apple Sauce
DRINK (check 1)	DRINK (check 1)	DRINK (check 1)	DRINK (check 1)	DRINK (check 1)
<input type="checkbox"/> Juice	<input type="checkbox"/> Juice	<input type="checkbox"/> Juice	<input type="checkbox"/> Juice	<input type="checkbox"/> Juice
<input type="checkbox"/> Milk	<input type="checkbox"/> Milk	<input type="checkbox"/> Milk	<input type="checkbox"/> Milk	<input type="checkbox"/> Milk
<input type="checkbox"/> Water	<input type="checkbox"/> Water	<input type="checkbox"/> Water	<input type="checkbox"/> Water	<input type="checkbox"/> Water

Please make checks payable to Tallahassee Museum
****If paying in cash please use EXACT change****

Signature: _____ Date: _____

By signing above, you are approving the selection you have made.

For any special accommodations, please contact the museum at cwaters@tallahasseeemuseum.org.

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