

St Mary's French Immersion Catholic School

SCHOOL MILK ORDER

May 2017

Please return this form with payment by **Monday, April 24, 2017**

Each child requires his/her own form. Do not combine with pizza or pasta orders.

Name: _____

Grade: _____

Teacher: _____

White Milk # ___ X \$1.00= _____

Chocolate Milk # ___ X \$1.00 = _____

TOTAL COST _____

Indicate in each box whether you want white or chocolate milk. **W = White**

C=Chocolate

May 2017				
Monday	Tuesday	Wednesday	Thursday	Friday
1	2	3	4	5
8	9	10	11	12
15	16	17	18	19
22 no school	23	24	25	26

Return the above portion to the school

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May 2017				
Monday	Tuesday	Wednesday	Thursday	Friday
1	2	3	4	5
8	9	10	11	12
15	16	17	18	19
22 no school	23	24	25	26

Keep this portion for your records.