

MILK ORDER FORM
2019/2020

Child's Name: _____

Child's Grade: _____ Teacher: _____

***Preference:** White _____ or Chocolate _____
**(If not specified, white milk will be ordered)*

Milk Money:	1st Semester (Sep/Oct/Nov/Dec)	\$29.20
	2nd Semester (Jan/Feb/Mar/Apr/May)	\$36.00
	Year	\$65.20

Amount Paid: _____

Please fill out a form for **each** student – you may send **one** check!

Forms must be turned in by ***Wednesday, August 28, 2019***

Milk Service will begin on Tuesday, September 3, 2019