Suggested Birthday Snacks

Date Snack Requested: _____

Take the hassle out of purchasing and delivering snacks to school by ordering nutritional snacks from the Camanche School District Food Service Department.

Child's Name: _____

Grade: _____ Teacher: _____

# of Children: _____

Contact: _____ Phone: _____

Choose one (1) snack:

____ Happy Birthday Chocolate Cupcake ____ Cinnamon Teddy Grahams

____ Happy Birthday Vanilla Cupcake ____ Rice Krispie Treat

____ Granola Bars ____ Hunts FF Chocolate Pudding Cup

____ Goldfish ____ Hunts FF Vanilla Pudding Cup

____ Cheez-its ____ Quakers Kids Snack

Choose one (1) drink:

____ 100% Juice ____ Milk ____ 8 oz. Bottled Water

Send order form and payment to: Camanche Community School District, Attn: Food Service, 702 13th Avenue, Camanche, IA 52730. Make checks payable to **Camanche Community School District**. Only prepaid orders received at least one week in advance will be filled and delivered.

Payment Due: _____ x $.90 = _____
Students Total