

**ST. CHRISTOPHER SCHOOL
PRE-PAID LUNCH PAYMENT SLIP**

Please Print Clearly

St. Christopher School

Date:____/____/____

Student Name:_____ Grade:_____ Homeroom:_____

Amount Enclosed \$_____ Number of Lunches:_____

Please make checks payable to **Sweet Home Lunch Program** and **WRITE STUDENT'S LAST NAME AND HOMEROOM # ON CHECK.** Lunches are \$2.40 each

**ST. CHRISTOPHER SCHOOL
PRE-PAID LUNCH PAYMENT SLIP**

Please Print Clearly

St. Christopher School

Date:____/____/____

Student Name:_____ Grade:_____ Homeroom:_____

Amount Enclosed \$_____ Number of Lunches:_____

Please make checks payable to **Sweet Home Lunch Program** and **WRITE STUDENT'S LAST NAME AND HOMEROOM # ON CHECK.** Lunches are \$2.40 each