**Change of Meal Type**

Could you please complete and return this form to the Main School Office: -

**£2.40** Daily

**£9.60** Monday to Thursday

**£12.00** Monday to Friday

|  |  |
| --- | --- |
| **Name of Child:**  |   |
| **Class:**  |   |
| **Current Meal Type:** (Please tick)  | Packed Lunch                         Paid School Dinner                    o                                                    o  |
| **Changing to Meal Type:** (Please tick)  | Packed Lunch                         Paid School Dinner                    o                                                    o  |
| **Start Date:**  |   |
| **Parents Name:**  |   |
| **Parents Signature:**  |   |

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**For Office Use**

|  |  |
| --- | --- |
| **Child’s Name**  |   |
| **Class**  |   |
| **Date Applied on System**  |   |
| **Office Signature**  |   |