**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** |  |