



# Milk Order Form

Please complete ONE ORDER FORM PER STUDENT

(No combined orders please)

ORDERS ARE DUE Friday, January 23rd

Ordering Options: (For the 8 week period of Feb. 2<sup>nd</sup> - Apr. 2<sup>nd</sup>)

Option		White or Chocolate Milk
A	MILK EVERYDAY	\$36.10
B	MILK ON MON/WED/FRI	\$20.90
C	MILK ON FRIDAY ONLY	\$7.60

Student Name: \_\_\_\_\_  
(First Name) (Last Name)

Teacher: \_\_\_\_\_

Please circle ONE option and CHECK white OR chocolate milk for each day of the week.

A (Everyday)    or    B (Mon/Wed/Fri)    or    C (Fri. Only)

DAY OF WEEK	WHITE MILK	CHOCOLATE MILK
MONDAY		
TUESDAY		
WEDNESDAY		
THURSDAY		
FRIDAY		

I have enclosed a cheque for \$ \_\_\_\_\_ (payable to Fred C. Cook) OR the exact change if paying with cash.

Parent Signature: \_\_\_\_\_

Phone: \_\_\_\_\_

