

Order Form

BUILDING NAME— _____

DATE RECEIVED _____

DATE NURSE APPROVED & INITIALS _____

DATE SNACK NEEDED _____

STUDENT NAME _____

TEACHER NAME _____

ROOM NUMBER _____

ITEM: _____

QUANTITY _____ x \$ _____ = _____

ITEM: _____

QUANTITY _____ x \$ _____ = _____

ITEM: _____

QUANTITY _____ x \$ _____ = _____

Check Number— _____

GRAND TOTAL— \$ _____

Parent Name _____ Contact

Number _____

_____ below for nurse and food service only _____

Nurse Approval initials and date _____

Cashier initials and date _____



Peanut Free Zone Gluten Free Items Available



Nutritional and Ingredient information is provided to the school nurse to ensure all children are able to have a snack. If a product you choose for your child's snack is not compatible for a student with dietary needs a substitute product will be included.

Please see the PTSD district policy on Food Service for approved procedures.



PARTY SNACK LIST 2017-2018

Penn Trafford School District



Please see inside brochure for ordering details

Telephone: 724-744-2664—Food Service Office

**Approved Penn Trafford School
District Party Snack List**



To ensure the safety of all our students during classroom parties, this list of party treats is approved to be ordered through the Penn Trafford Food Service Department.

Penn Trafford School District is a peanut and tree nut free district. No items on the list contain nuts.

Please make your selection and return the completed form to your child's **school nurse** for approval two weeks prior to their birthday.

All snacks must be approved by the Nurse prior to being filled by the Food Service Staff.



All Baked Chips & Snacks—\$0.60 each

Plain Baked Lays Goldfish Crackers
Baked Doritos Mini Pretzels
White Cheddar Popcorn



Fruit Snacks—\$0.45 each

Scooby Doo Fruit Gushers
Fruit by the Foot

Treats—\$0.50 each

100 Calorie Chips Ahoy 100 Calorie Oreos
WG Rice Krispie Treat Scooby Doo Grahams

Fresh Fruit—\$.50 each

Fresh Whole Apple or Orange

Ice Cream Cup—\$0.60 each (choice of vanilla/
birthday cake/chocolate)

Italian Ice—\$0.60 each (choice of orange/
lemon/Raspberry)

Any item not on the list or an item that is needed in bulk - please speak directly with the food service director for product availability and pricing.

Beverages

1%, Skim or Chocolate Milk—\$0.45 each
Apple or Orange Juice (4oz) - \$0.30 each
8oz Bottled Water— \$0.40 each

Please fill out the back side of this form and return it with payment to the **school nurse** — recommend two weeks to ensure products are ordered. Orders received within the two week timeframe are not guaranteed by the date needed. Once the order has been approved by the school nurse the order will be filled. ***All checks make payable to: PTSD Food Service.***

