



**2020 - 2021  
AM & PM Milk Order Form**

**STUDENT NAME:** \_\_\_\_\_ **GRADE:** \_\_\_\_\_

**TRIMESTER:** \_\_\_\_\_

<u>AM Milk</u>	<u>W/C</u>	<u>PM Milk</u>	<u>W/C</u>
\$29.50	_____	\$29.50	_____

(Please indicate AM and/or PM and White or Chocolate milk)

**TOTAL PAYMENT ENCLOSED \$** \_\_\_\_\_

*Please send this form along with payment. Thank you.  
One student per form please. Payments can be combined.*