



Wright-Patt Club Boxed Lunch

Boxed meals are \$15.00 each and include one main entrée, side, drink, and cookie

*For orders of 35 lunches and over, please choose only 3 main entrée meals.

*Orders must be submitted 5 business days before date of pick up

*There will be a \$40.00 rush charge on all orders submitted with less than 48 hours notice.

*Additional sides and beverages can be purchased separately in the Valkyrie Cafe.

Lunch Options: Please indicate the number needed

_____ **Greek Goddess Salad** - mixed greens, seasonal berries, honeyed pecans, feta cheese, farro, cucumbers, roasted red peppers, red wine honey vinaigrette (*contains nuts*)

_____ **Kale Caesar Salad** - romaine, kale, hard boiled eggs, parmesan crisps, quinoa, caesar dressing; (GF)

_____ **South by Southwest Salad** - mixed greens, peppadew peppers, roasted corn, quinoa, radishes, roasted tomatoes, cotija cheese, and roasted serrano buttermilk dressing

_____ **Vegetarian Splendor Wrap** - hummus, havarti cheese, cucumbers, red onion, roasted tomatoes, carrot-radicchio slaw on a spinach tortilla (V)

_____ **Smoked Turkey Santa Fe Wrap** - smoked turkey, bacon, lettuce, tomatoes, and chipotle ranch on a Jalapeno-cheddar wrap

_____ **Pesto Chicken Wrap** - pesto marinated diced chicken, bacon, roasted tomatoes, lettuce, parmesan cheese, pesto aioli, in a sundried tomato basil wrap

_____ **Curried Chicken Salad Croissant** - curried chicken salad with currants, toasted almonds, roasted tomatoes, and lettuce on a croissant (*contains nuts*)

_____ **Club Sub** - turkey, ham, bacon, swiss, cheddar, lettuce and tomato on a sub roll, condiments on the side

Sides: Select 1 side below

Classic Potato Chips

Beverages: Please indicate quantity needed

Bottled Water _____

Lemonade _____

Bottled Tea _____

Customer Special Notes:

Please send completed forms to: **88FSS.Catering.WPAFB@us.af.mil**

Call (937) 522-2166 or (937) 522-2160 with any questions.

Group Name: _____

Date and Time Boxed Lunches Needed: _____

Point of Contact: _____

POC Phone Number: _____

POC Email: _____

POC Signature: _____