



Birthday in a Box

The Madison Food & Nutrition Services Department would like to help you celebrate your child's birthday!

1. Please select one type of treat to purchase for the entire class.
2. **Return this form & cash/check payment to cafeteria no later than 7 days in advance.**
Checks are made payable to: "Madison Food Service."

School :
Child's Name:
Grade:
Teacher's Name:
Date Needed:
Requester's Name:

Phone Number (if we have questions about your order:

Choice of Treat	Ingredient Info	Cost per treat	Number of Treats Needed	Extended Price (Cost x Number of treats Needed)
Fruit Roll Ups	Dairy Free, Gluten Free, & Kosher	\$0.50		
Cocoa Puff Bars	Dairy Free	\$0.50		
Blue Raspberry Slush	Dairy Free & Gluten Free	\$1.00		
Strawberry Kiwi Slush	Dairy Free & Gluten Free	\$1.00		
Chocolate Chip Rice Krispies	Gluten Free	\$0.75		
Triple Chocolate Fudge Cookie	Kosher	\$1.00		
Ice Cream Sandwiches	Kosher	\$1.00		
Chocolate Sundae Crunch Bar	Kosher	\$1.00		
Brownie	-	\$1.00		

***Birthday Treats do not contain tree nuts/peanuts in ingredients
But may be manufactured in a plant that contains them***

This institution is an equal opportunity provider.

*****For School Use Only*****

Cafeteria Manager Signature: _____

Date Ordered: _____ Amount Received \$: _____ Cash: _____

Check#: _____ Titan Account: _____

