

 **Change of school dinner arrangements**

Pupil name:…………………………………………………………

Parent/Carer name: …………………………………………………………

Relationship to Child/Children:………………………………………………..

What do you want to change?

From school dinners to packed lunch

From packed lunch to school dinner

A member of staff from the school office will contact you with a start date for your child’s new meal arrangement.

Signed :………………………………………………………… Date:…………………………………………

OFFICE USE ONLY: Input on system by : ......................................Date inputted:………………………….