

Madera Unified School District  
 Child Nutrition Department  
**Field Trip Meal Request**

Breakfast

Lunch

_____	_____	_____
School Name	Date of Trip	# of Meals Requested
_____	_____	_____
Name of Teacher	Room Number	Grade
_____		
Destination of Field Trip		

**Meals Will Be Picked Up In Cafeteria:**

_____	_____	_____
At What Time	By Whom (Name if known)	Person Ordering Meals

**Instructions to complete the Field Trip Meal Request:**

- Obtain the form online at [www.musdgofresh.com](http://www.musdgofresh.com)
- Return 'Meal Request Form' to the **CN Staff Site Lead** at your school **10 days prior to the field trip**
- Day of Field Trip
  - Teacher/Designee will obtain a roster from the school office of students attending the field trip
  - Teacher/Designee **MUST** check the name of each student **as they receive their meal**
  - If a roster is not provided by school office, the Teacher/Designee **MUST** list all student names as they pick up their meal
  - Teacher/Designee **MUST** return the roster/list as well as any money collected to CN Staff Site Lead upon return
    - \* All meals are to be paid or prepaid the day of the field trip (not after)
    - \* Adult Meals = \$4.50 w/out milk or \$5.00 w/milk

**E. The Teacher/Designee MUST return all equipment (bags, cold plates, cart) provided to CN Staff Site Lead upon return**

- \* If CN Staff Site Lead is not accessible, please take all equipment to classroom and return to CN Staff Site Lead the following morning
- \* **School Site will be billed accordingly for missing equipment upon return**

- Cancellation is 24 hours prior to scheduled pick up
  - Failure to notify the Production Kitchen will result in school being billed for the order

For Child Nutrition Office (CNO) Use Only:	Equipment Inventory:
1 copy - Production Kitchen	Bag(s) _____ X \$80 = _____
1 copy - CN Staff Site Lead	C. Plate(s) _____ X \$60 = _____
1 copy - Teacher/Designee	Cart _____ X \$120 = _____