Sub Lunch	Order Form Oct 15", 2014 to June 10", 2015 (Full Year Order)
Student's na	me: Student's teacher:
	First name Last name Classroom #:
Phone #: (_) Email:
Oct 15 Oc Feb 25 Ma All choice:	All dates are Wednesday) t 29 Nov 12 Nov 26 Dec 10 Jan 14 Jan 28 Feb 11 ar 11 Apr 1 Apr 15 Apr 29 May 13 May 27 June 10 s reflect the Healthy Schools requirements. noice below by checking appropriate box:
6" Sub with	Chocolate Chip Cookie – for 16 lunches @ \$5.25 \$84.00
Payment M	<u>lethod</u>
On Line (cre	edit or debit) OR Cheque [(payable to LBP)
Payment Options: (1) Pay in full for entire year \$84.00	
Sub Select	<u>ion</u>
Choose 1 of:	Ham OR Roast Beef OR Veggie OR Turkey
Choose:	Cheese OR No cheese
Choose:	Lettuce/Tomato (both only) OR No vegetables
Choose:	Mustard
NOTE:	ALL SUBS WILL BE SERVED ON A WHOLE WHEAT BUN
Example:	
Choose 1 of: Choose:	Ham ⊠ OR Roast Beef □ OR Veggie □ OR Turkey □ Cheese □ OR No cheese ⊠
Choose:	Lettuce/Tomato (both only)
Choose:	mustard ⊠ OR No sauce □ OR Lite Mayo □
=> Child will g	et a ham sub with no cheese, with lettuce & tomato and mustard

SUB ORDER FORM

October 15th, 2014 to June 10th, 2015 Grade 8 Fundraiser 2014-2015 Thank you for your support!

Thank you to our supplier of subs: SUBWAY Subs

15483 Yonge St. (across from Howard Johnson Hotel)

Please follow these instructions:

- 1 order form PER CHILD Submit/Return by Tuesday September 30th, 2014.
- No Late orders will be processed.
- Payment PER CHILD please (Do not send one payment to cover all siblings)
- Cheque or Online (credit or debit)
- Please make cheques payable to:

Lester B. Pearson P.S. (LBP PS)

****Note Full Year Order Only****

Sub Lunches Oct 15th, 2014 to June 10thth, 2015 - Wednesdays

Oct 15 Oct 29 Nov 12 Nov 26 Dec 10 Jan 14 Jan 28 Feb 11 Feb 25 Mar 11 Apr 1 Apr 15 Apr 29 May 13 May 27 June 10