

**Manor ISD**  
**Food Service Department**  
**Field Trip Request/Notice Form**  
**TWO WEEK NOTICE REQUIRED**

Date of Request/Notice: \_\_\_\_\_

Campus or School: \_\_\_\_\_

Specific Grade Level/Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Date of Field Trip: \_\_\_\_\_

Approximate # of Students Attending Field Trip: \_\_\_\_\_

Sack Lunches Needed: YES \_\_\_\_\_ NO \_\_\_\_\_

Approximate # of Students Needing Sack Lunches: \_\_\_\_\_

Time Lunches will be Picked Up: \_\_\_\_\_

**A list of students with id numbers that will need sack lunches must be attached to this form.**

Please submit two weeks in Advance

For Child Nutrition Department Use Only:

\_\_\_\_\_

Food Service Manager

\_\_\_\_\_

Date

# Field Trip Meal Count

Contact Name: \_\_\_\_\_

Field Trip Date: \_\_\_\_\_

TOTAL NUMBER OF MEALS NEEDED \_\_\_\_\_

Student Name	Student ID #	Balance Due
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
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