

SACRED HEART CATHOLIC PRIMARY SCHOOL
FROM SCHOOL DINNERS TO PACKED LUNCHES



I wish my child (child's name).....to change
from school dinners to packed lunches with effect from (date) *

* 1-2 weeks notice will be required.

I agree to pay for any outstanding meals in full.

Signed(Parent/Carer)

For office use only: Input on System Date

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