

Memphis Campus
Flik Meal Service Election Form
2016-2017 School Year

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|---------------------------------------|
| Student Name: _____ Grade: _____ |
| Parent/Guardian Names: _____ _____ |

Please initial in the box below if you would like to sign up to participate in the Flik lunch program. Return this form to the front desk prior to the start of school (August 15).

| Initial | Service | Cost |
|---------|---------|--------------------|
| _____ | Lunch | \$60.00 per month* |

*For 2016/2017, the monthly cost of the meal service is waived for those students who meet the qualifications for the federal free and reduced meal program.