

MCSD - Child Nutrition Department Student Cafeteria Account Restrictions Form

117 Fourth St. ● P.O. Box 159

Flora, MS 39071

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The Child Nutrition Department understands that parents may wish to limit their child's daily spending in the cafeteria. This form is required only for parents that would like to place spending restrictions on their child's cafeteria account.

STUDENT INFORMATION		
School:		Grade:
Student		Student
Name:		Birth Date//
PARENT INFORMATION	NO	
Parent		
Name(s): Contact/		
Phone #:		
	ections are categorized as <i>Meal Trays</i> or <i>A' La Carte</i> ryour child's account, please check the appropriate b	•
	One Meal Tray Only / Cash only for A' Id • My child may purchase a Meal Tray only.	a carte
	 My child will bring cash daily when purchasing A' 	La Carte (extra) items
	Wild will bring cost dutily when purchasing /	za carte (extra) rems.
	One Meal Tray Only / NO A' la carte	
	 My child may purchase a meal tray only. 	
	 My child may not purchase a la carte items. 	
	No Restrictions Use this option to remove any p	revious requests for account restrictions.
	 allow my child to make purchases in the cafeteria v 	without any previous restrictions.
OTHER:		
	(Parent Signature)	(Date)