

Scenic Hills Christian Academy
February 2022 Menu

Monday	Tuesday	Wednesday	Thursday	Friday
	1 Tostadas Rice & Veggies Fruit & Drink	2 Spaghetti w/meat sauce Salad & Bread Fruit & Drink	3 Crispy Tacos Rice & Beans Fruit & Drink	4 Pizza Salad Fruit & Drink
7 Hot Dogs Bake Fries Fruit & Drink	8 Burrito Supreme Fruit & Drink	9 Haystack Veggies Fruit & Drink	10 Sopes Rice & Veggies Fruit & Drink	11 Pizza Salad Fruit & Drink
14 Lasagna Salad & Bread Fruit & Drink	15 Sub Sandwich Chips Fruit and Drink	16 Street Tacos Charro Beans Fruit & Drink	17 Grilled Cheese Sandwich Tomato Soup Fruit & Drink	18 Pizza Salad Fruit & Drink
21 Vegetarian Meatloaf Mash Potatoes & Veggies Fruit and Drink	22 Flautas Rice & Beans Fruit & Drink	23 Sloppy Joe Bake Fries Fruit & Drink	24 Bean & Cheese Burrito Green Salad Fruit and Drink	25 Pizza Salad Fruit & Drink
28 Baked Potato Steam Veggies Fruit and Drink				

Sub Menu: If on any given day you wish to substitute the main course with a sub-menu item listed below, please choose a **Sub#** and write that number in the square box on the order form. All come with the same side food.

SUB #1	SUB #2 (<i>Field Trip Lunch</i>)
Burrito	Sandwich

- Lunch fee: K3-Kinder, \$4.00; 1st– 12th, \$5.00. Not responsible for lost cash payments.
- **Payment Options:** 1) Cash; 2) Checks: Please make checks payable to: "Daleth Mendoza". There will be a \$25 service fee plus late fees for all returned Checks; or 3) Zelle @ 830-584-6405
- Late charge. After five days of your due date, 25% of what you owe will be applied to you.
- **Absence & Credit:** If your child will NOT be at lunch, **YOU MUST CALL BEFORE 9:00 AM** @ 830-584-6405 or 210-523-2312 ext.103, the morning of the absence. Please call me and request CREDIT for THE NEXT MONTH. The credit applies for the following month only.
- **Please take responsibility for your child if they have allergies. We are not responsible for food-related allergy attacks.**



(Cut and return the bottom part with payment)

Child's name _____	Grade _____
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PLEASE MARK (X) FOR LUNCH DATES or SUB#.

January total lunches: 15

T	W	TH	F	M	T	W	TH	F	M	T	W	TH	F	M	T	W	TH	F	M
1	2	3	4	7	8	9	10	11	14	15	16	17	18	21	22	23	24	25	28

Number of lunches _____ X \$ _____ = \$ _____ TOTAL \$ _____

FOR LUNCH STAFF USE ONLY -

Type of payment received: Cash _____ Check# _____ Zelle _____ Amount paid: \$ _____ Date: _____