MILK PROGRAM REQUEST (PLEASE ATTACH \$100.00 CHECK TO THIS ORDER) MUST BE IN BEFORE FIRST DAY OF CLASSES

Milk is \$100.00 per child for the year. PLEASE ISSUE A SEPARATE CHECK FOR THE MILK PROGRAM MADE PAYABLE TO HILLANDER SCHOOL.

I want the milk program for	for this year.
(Child's	for this year.
I want my child to receive	milk.
I want my child to receive (Please choose <u>one</u> - White or	r Chocolate – both are low fat)
Parent Signature	Grade
MII K PRO	OGRAM REQUEST
(PLEASE ATTACH \$10	00.00 CHECK TO THIS ORDER) RE FIRST DAY OF CLASSES
Milk is \$100.00 per child for the yea	r. PLEASE ISSUE A SEPARATE CHECK
FOR THE MILK PROGRAM MAD	E PAYABLE TO HILLANDER SCHOOL.
I want the milk program for	for this year.
(Child's	name)
I want my child to receive	milk.
	r Chocolate – both are low fat)
Parent Signature	Grade
MILK PRO	OGRAM REQUEST
(PLEASE ATTACH \$10	00.00 CHECK TO THIS ORDER)
MUST BE IN BEFOR	RE FIRST DAY OF CLASSES
Milk is \$100.00 per child for the yea	r. PLEASE ISSUE A SEPARATE CHECK
FOR THE MILK PROGRAM MAD	E PAYABLE TO HILLANDER SCHOOL.
I want the milk program for	for this year.
I want the milk program for(Child's	name)
I want my child to receive	milk.
(Please choose one - White or	r Chocolate – both are low fat)
Parent Signature	Grade