



# FEBRUARY 2021

## Moonachie Elementary School



**Free meals for all students\***



[Take Home Meal Storage  
and Handling  
Instructions](#)



MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
1 Southern-Style Chicken Tenderloins w/ a Dinner Roll Vegetable & Fruit	2 Nachos w/ Beef, Cheese & Tortilla Rounds Vegetable & Fruit	3 Waffle Pouch w/ Egg Patties, Smile Fries & Fruit	4 Grilled Chicken on a Bun w/ French Fries & Fruit   <b>Free Cookie w/ Lunch</b>	5 Pizza Quesadilla Vegetable & Fruit
8 Popcorn Chicken w/ a Dinner Roll Vegetable & Fruit	9 Pizza Quesadilla Vegetable & Fruit	10 Cheese Stuffed Sticks w/ Marinara Sauce Vegetable & Fruit	11 Southern-Style Chicken Tenderloins w/ French Fries, a Dinner Roll & Fruit	12 School Closed
15 School Closed	16 Meatballs w/ Cheese & Garlic Bread Vegetable & Fruit	17 Pizza Crunchers Vegetable & Fruit	18 Fajita Chicken Wrap w/ Cheddar Cheese Vegetable & Fruit	19 Pizza Quesadilla Vegetable & Fruit
				
22 Spicy Chicken Patty on a Bun Vegetable & Fruit	23 Cheeseburger on a Bun w/ French Fries & Fruit	24 Pancake Pouch w/ Egg Patties, Hash Brown & Fruit	25 Boneless Chicken Wings w/ Tater Tots, a Dinner Roll & Fruit	26 Pizza Vegetable & Fruit
<b>Monday Breakfast</b> Large Muffin	<b>Tuesday Breakfast</b> Assorted Cereal & Graham Crackers	<b>Wednesday Breakfast</b> Bagel	<b>Thursday Breakfast</b> Pop-Tarts	<b>Friday Breakfast</b> Cinnamon Roll

Contact your cafeteria for  
**Alternate Vegetarian Options**

**A Complete Lunch Includes:**  
Protein, Grain, Vegetable, Fruit  
& Milk

*Menu Subject to Change*

**FOOD  
ALLERGIES**

Allergy Aware menus are available for students with food allergies. For more information contact your Food Service Director or see our Food Allergy Best Practices at [www.pomptonian.com](http://www.pomptonian.com).



**At least 50% of All Grains served  
w/ your meal are Whole Grain Rich**



**\*USDA approved until further notice**

"This institution is an equal  
opportunity provider."



# February MOONACHIE 2021

Robert L. Craig Elementary School  
ORDER FORM



Please indicate your breakfast and lunch choice by including the code from the list below in the appropriate box for the days you would like to order. Return each form to the school **by 9:00 a.m. on the due date indicated** in an ENVELOPE with the exact money OR check made payable to the "Moonachie Board of Education."

**Breakfast Codes:** [B1] Daily Breakfast

**Lunch Codes:** [D1] Daily Lunch

**Breakfast:** No Charge  
**Reduced Breakfast:** No Charge  
**Free Breakfast:** No Charge

**Lunch:** No Charge  
**Reduced Lunch:** No Charge  
**Free Lunch:** No Charge

"This institution is an equal opportunity provider."

Tear at this line and return in an ENVELOPE.

DAY	BREAKFAST	LUNCH
MON 1		
TUE 2		
WED 3		
THU 4		
FRI 5		
<b>TOTAL \$:</b>		

**Please check if your student receives**

- Free Lunch  
 Reduced Price Lunch

STUDENT'S NAME \_\_\_\_\_

TEACHER \_\_\_\_\_ ROOM # \_\_\_\_\_

CONTACT PHONE # \_\_\_\_\_ TOTAL \$ \_\_\_\_\_

**NOTE TO FREE BREAKFAST/LUNCH RECIPIENTS:**

If you plan to participate in the lunch program, you **must** fill out and return this form.

**Please return form & payment by Tuesday, December 22, 2020**

DAY	BREAKFAST	LUNCH
MON 8		
TUE 9		
WED 10		
THU 11		
FRI 12		
<b>TOTAL \$:</b>		

**Please check if your student receives**

- Free Lunch  
 Reduced Price Lunch

STUDENT'S NAME \_\_\_\_\_

TEACHER \_\_\_\_\_ ROOM # \_\_\_\_\_

CONTACT PHONE # \_\_\_\_\_ TOTAL \$ \_\_\_\_\_

**NOTE TO FREE BREAKFAST/LUNCH RECIPIENTS:**

If you plan to participate in the lunch program, you **must** fill out and return this form.

**Please return form & payment by Tuesday December 22, 2020**

DAY	BREAKFAST	LUNCH
MON 15		
TUE 16		
WED 17		
THU 18		
FRI 19		
<b>TOTAL \$:</b>		

**Please check if your student receives**

- Free Lunch  
 Reduced Price Lunch

STUDENT'S NAME \_\_\_\_\_

TEACHER \_\_\_\_\_ ROOM # \_\_\_\_\_

CONTACT PHONE # \_\_\_\_\_ TOTAL \$ \_\_\_\_\_

**NOTE TO FREE BREAKFAST/LUNCH RECIPIENTS:**

If you plan to participate in the lunch program, you **must** fill out and return this form.

**Please return form & payment by Tuesday, January 5, 2021**

DAY	BREAKFAST	LUNCH
MON 22		
TUE 23		
WED 24		
THU 25		
FRI 26		
<b>TOTAL \$:</b>		

**Please check if your student receives**

- Free Lunch  
 Reduced Price Lunch

STUDENT'S NAME \_\_\_\_\_

TEACHER \_\_\_\_\_ ROOM # \_\_\_\_\_

CONTACT PHONE # \_\_\_\_\_ TOTAL \$ \_\_\_\_\_

**NOTE TO FREE BREAKFAST/LUNCH RECIPIENTS:**

If you plan to participate in the lunch program, you **must** fill out and return this form.

**Please return form & payment by Tuesday, January 12, 2021**