Roosevelt School

711 Summit Avenue River Edge, New Jersey 07661 "A Kíd's Place"

www.riveredgeschools.org

 Michael Henzel
 201-261-1546

 Principal
 Fax: 201-261-0798

LUNCH ROUTINE

Dear Parent/Guardian:

To keep track of student's lunch routine, please fill in the blanks below and return it to your child's classroom teacher. You need only to complete the form once.

When there is a change in your child's lunch schedule, it's imperative that you notify the office. We will not permit a student to leave the campus unless we have specific instructions from a parent/guardian. **All parents/guardians must come into the office to sign their child out.** Please remind your child that they may not make arrangements to go off campus <u>without written parental consent</u>.

With Roosevelt Pride,						
Michael Henzel, Principal						
Student Name:	ident Name:			Teacher:		
Days staying for lunch:	(Circle below)					
Everyday Moi	nday Tuesday	Wednesday	Thursday	Friday		
Parent/Guardian Signatu	ıre:					
Print Parent Name:		Date:				

Lunch.doc 7/11/16