July 2011

Dear Parents and Guardians:

We have a computerized system in each of our schools that will benefit you and our students. Each student now has an "account" with us. This is a debit account, which means that after you deposit money into your child's account, your child will be able to use his/her ID card to purchase food in our cafeteria. Cash will no longer be necessary. Time on the lunch line will be reduced, giving your child more time to actually eat and enjoy the meal.

Each student's computerized ID card, with bar code, can be used in both the cafeteria and library. Cafeteria purchases will automatically be deducted from the student's account. Students have the option of accessing their meal accounts by entering their personal identification numbers, which are found on the back of their identification cards, on the keypad located at the end of the lunch line. Please instruct your child to remember this number and NOT share it with anyone.

A full Type "A" lunch will cost $1.40 and a full Type "A" breakfast will cost $1.00. You have the choice to specify what money is deposited towards breakfast credits, lunch credits and/or a la carte sales (snack items).

If the student is eligible for a free meal, the computer will automatically know the child's status and charge nothing. Reduced meals will be charged accordingly. If you deposit $25 towards lunch credits, you will receive a total of 20 lunches, a savings of $3.00. If you deposit $19 towards breakfast credits, you will receive a total of 20 breakfasts, a savings of $1.00.

If you would like your child to participate in this optional program, you must deposit, by cash or check, a minimum of $10 into your account. Simply complete the deposit form below. Make your check payable to "H. Frank Carey High School Lunch Fund". You may write one check for all family members – just indicate the breakdown on the form below.

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SEWANHAKA CENTRAL HIGH SCHOOL DISTRICT
Cafeteria Deposit Form
2011-2012 School Year

Name of Student(s): **Amount to be credited for each student:**

	Last Name	**First Name**	**ID #**	**Breakfast**	**Lunch**	**A la Carte**	**Student Total**
(1)	______________________,	__________	____________	$_______	$______	$ ______	$__________
(2)	______________________,	__________	____________	$_______	$______	$ ______	$__________
(3)	______________________,	__________	____________	$ _______	$______	$ ______	$__________
(4)	______________________,	__________	____________	$_______	$______	$ ______	$__________

(Use reverse side for additional student names.)

TOTAL FAMILY DEPOSIT $__________________

Home Address: ____

Home Telephone #: __________________________

Home School: ____

PLEASE INDICATE YOUR HOME ADDRESS AND TELEPHONE NUMBER ON CHECK.

Please note: There will be a $15 fee for all returned checks.

RETURN ALL DEPOSIT FORMS TO THE FINANCE CLERK IN THE MAIN OFFICE OF YOUR SCHOOL.