

Lunch Duty Opt-Out Form Grades K-8
2019-2020

Child's Name: _____ **Grade:** _____

Child's Name: _____ **Grade:** _____

Parent Name: _____

Checks and Money Orders should be made payable to : IHM School

\$130 Opt-Out Fee Enclosed as: _____ CHECK _____ MONEY ORDER

Opt-Out Fees must be paid by CHECK or MONEY ORDER ONLY. No cash please.
Opt-Out Fees and Forms must be submitted to the school office in September.

The Lunch Duty Schedule is created over the summer, so please indicate your intention to Opt-Out as soon as possible. This will allow the schedule to be finalized in a timely manner. Thank you for your cooperation.

If you have questions, please contact me at aobriskie@ihmscarsdale.org.

Regards,
Alece O'Briskie

Rec'd in office by: _____ Date: _____ Payment Ref. #: _____