

Pre-Paid Lunchroom Card Registration

Student's name: _____ Grade: _____

Parent's name: _____

Parent's email: _____ Phone #: _____

Preferred method to contact you for account: email phone

Amount sent to open account (minimum of \$50 required): _____
(cash or check only—make checks payable to ACA)

*Lost cards will be replaced and charged a \$5.00 replacement fee.

Pre-Paid Lunchroom Card Registration

Student's name: _____ Grade: _____

Parent's name: _____

Parent's email: _____ Phone #: _____

Preferred method to contact you for account: email phone

Amount sent to open account (minimum of \$50 required): _____
(cash or check only—make checks payable to ACA)

*Lost cards will be replaced and charged a \$5.00 replacement fee.

Pre-Paid Lunchroom Card Registration

Student's name: _____ Grade: _____

Parent's name: _____

Parent's email: _____ Phone #: _____

Preferred method to contact you for account: email phone

Amount sent to open account (minimum of \$50 required): _____
(cash or check only—make checks payable to ACA)

*Lost cards will be replaced and charged a \$5.00 replacement fee.
