



Give THANKS
to one another as I have
given thanks to you.



Please complete the bottom portion and return this form with payment by **Friday, November 6th** to the office. This is a firm deadline to ensure an accurate count and so table seating can be assigned by family. Please gather in the church Commons. Students will be brought to the Gym and seated. A special invitation will be sent home the following week for the children to deliver to their grandparent(s)*. Lunch will be provided by Morrissey's Deli & Catering. Due to the volume, no special allergy or meal requests can be accommodated.

Adult Lunch Choices (All meals include a side of mixed fruit, chips, drink and special dessert):

- A. Turkey Sandwich – turkey breast, provolone, lettuce & tomato on freshly-baked Kaiser roll
- B. Homemade Chicken Salad Croissant – chicken salad with lettuce & tomato on flaky croissant
- C. Veggie Wrap – cucumber, red onions, roasted red peppers, provolone, lettuce, tomato & vinaigrette dressing in a spinach wrap
- D. Pear & Strawberry Salad with walnuts & bleu cheese crumbles topped with grilled chicken breast, balsamic vinaigrette dressing

Student Lunch Choices (includes side of mixed fruit, Sun Chips, drink, and special dessert):

- A. Ham & American Cheese on small round roll
- B. "Meal Kit" with crackers and cubed cheese



*Prefer to attend with your own packed lunch? Include admission of \$2.00 per person who will bring their own.

Please print clearly and circle one lunch choice for each row used.

List All Attendees (First and Last)	Student's Grade	Student's Teacher	(Circle One)		(Circle One)				(Circle One)	
			Order Lunch		Adult Lunch				Student Lunch	
			YES	NO	A	B	C	D	A	B
			YES	NO	A	B	C	D	A	B
			YES	NO	A	B	C	D	A	B
			YES	NO	A	B	C	D	A	B
			YES	NO	A	B	C	D	A	B
			YES	NO	A	B	C	D	A	B

Please rank your seating choices. Every effort will be made to accommodate all requests.

Note: Pre-K students will automatically be placed in the first seating, along with their older siblings.



10:30 am Seating
Rank _____

1:00 pm Seating
Rank _____

No Preference

Please seat our family with: _____ (print other family's name here).

Number of Tickets (no lunch) _____ x \$2.00 **Number of Adult Tickets** _____ x \$12.00 **Number of Student Tickets** _____ x \$9.00 **Total Amount Enclosed**** \$ _____

*If grandparent(s) are unable to attend, please invite up to two special people!

** Checks are to be made payable to SEES.

We are updating our mailing list and would like to include grandparents so we can keep them informed of special SEES events, such as the Grandparents' Luncheon.

Please take a minute to complete the following. Many thanks!!



SEES Student(s):

Name:

Grade:

Name:

Grade:

Grandparent Info:

Name(s):		<u>Attending</u>
Address:		Yes
City:	State: Zip Code:	No
Email:		
Name(s):		<u>Attending</u>
Address:		Yes
City:	State: Zip Code:	No
Email:		
Name(s):		<u>Attending</u>
Address:		Yes
City:	State: Zip Code:	No
Email:		