

Birthday Celebration



How to Place an Order:

1. Communicate with your child's teacher for the best date and time.
2. Choose one snack type from the list below (For the entire class.)
3. Decide on a method of payment and send in to Cafeteria (Cash, Check or Meal Account) **at least two weeks** prior to birthday party.
4. Call 518-237-0800 ex. 3330 or email ebourassa@whufsd.org to confirm

Type of Treat	Weight	Cost Each	Total
Ice Cream Dessert Cup - Low Fat Chocolate	3 oz.	\$.75	
Ice Cream Dessert Cup - Low Fat Vanilla	3 oz.	\$.75	
Fresh Fruit Cup (Healthier Alternative)	4 oz.	\$1.00	
100% Juice Rush Cups Flavors to include: Cherry Blue Raspberry, Lemon Orange, Strawberry Mango	4.4 oz.	\$.75	
Stick Bar - Creamsicle/Orange Blossom	2.5 oz.	\$.75	
Stick Bar - Non Fat Chocolate Sundae Crunch/Chocolate Scooter	2.75 oz.	\$.75	
Stick Bar - Non Fat Strawberry Sundae Crunch/Strawberry Scooter	2.75 oz.	\$.75	
Ice Cream Sandwich - Reduced Fat Mini Vanilla	2.5 oz.	\$.75	
Twister Cup, Gluten Free, No Fat Flavors to include: Banana Cream, Birthday Cake, Cotton Candy, Sour Blue Raspberry, Sour Green Apple	3.75 oz.	\$1.00	
Chocolate Chip Cookie 2pk	1.1 oz.	\$.75	
Welsh's Assorted Fruit Snacks	1.55 oz	\$.75	
		Total:	

Teacher: _____ Student: _____ Number of Students in Class: _____ Date: _____
