



# Tallahassee Museum

TREE TO TREE ADVENTURES

T: (850) 575-8684  
F: (850) 574-8243  
W: TallahasseeMuseum.org  
3945 Museum Drive  
Tallahassee, FL 32310

## DAY CAMP LUNCH ORDER FORM

**\$6.50 includes tax (EXACT CHANGE ONLY)**

*All lunches include one entrée, two sides, and a drink.*

Camper's Name: \_\_\_\_\_

Parent/Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Camp Grade (circle one): Kindergarten / 1<sup>st</sup> Grade / 2<sup>nd</sup> -5<sup>th</sup> Grade / JR CIT

Camp Title: \_\_\_\_\_ Camp Day: \_\_\_\_\_

Entrée (check 1)		Side 1 (check 1)		Side 2 (check 1)		Drink (check 1)	
<input type="checkbox"/>	Hamburger	<input type="checkbox"/>	Chips	<input type="checkbox"/>	Chips	<input type="checkbox"/>	Water
<input type="checkbox"/>	Hotdog	<input type="checkbox"/>	Fruit Cup	<input type="checkbox"/>	Fruit Cup	<input type="checkbox"/>	Milks
<input type="checkbox"/>	Chicken Nuggets (6 pcs)	<input type="checkbox"/>	Applesauce	<input type="checkbox"/>	Applesauce	<input type="checkbox"/>	Juice
<input type="checkbox"/>	Turkey & Cheese Sandwich	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
<input type="checkbox"/>	PB & J	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	

**Make checks payable to Tallahassee Museum OR EXACT CHANGE Required for Cash**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

By signing above, you are approving the selection you have made.

For any special accommodations, please contact the museum at

[cwaters@tallahasseemuseum.org](mailto:cwaters@tallahasseemuseum.org).

