



Birthdays – Easy, Fun, and Safe!

Let us Serve You!!!!

No need to make a special trip to the store or to school to provide treats for your class!

The food service department at St. Charles can provide you with all you need! We take care of everything: allergy needs, delivery to the class room, plates, napkins and utensils.

Please call or e-mail your Café Manager 1 week prior!

Blackhurst: Sharon Booker 636-443-4508 or sbooker@stcharlessd.org

Coverdell: April Hagan 636-443-4608 or ahagan@stcharlessd.org

Harris: Becky Love 636-443-4608 or bllove@stcharlessd.org

Lincoln: Chrissy Hinkel 636-443-4658 or chinkel@stcharlessd.org

Monroe: Donna Roth 636-443-4808 or droth@stcharlessd.org

Null: Rushell Payne 636-443-4908 or rpayne@stcharlessd.org

Jefferson: Debbie Thelen 636-443-4408 or dthelen@stcharlessd.org

1. Your Café Manager will call you to confirm the specific treat, any allergies in the classroom, and contact the teacher to determine the day and time for the treat to be delivered to the classroom..
- 2. Payment must be received 2 days prior to the event. No charging allowed.**
3. The cost of the treats will be deducted from your student’s lunch account.
4. You can send in a check or pay on line through pay pal as you normally would for your student’s breakfast and lunch meals.
5. *Receipts furnished upon request.

**To ensure that we are meeting allergy requirements and availability the treat menu is limited. The following snacks do not contain peanuts or tree nuts.

Fresh Apple or Banana	\$.55 ea
Crazy Color Roll Up	\$.55 ea
Fudge Bar	\$.55 ea (contains milk)
Double Chocolate Chip Muffin	\$.70 ea (contains eggs, milk, soy, and wheat)





City of St. Charles School District

Birthday Treat Form
Beginning September 2, 2016



Date of Event: _____ School: _____

Name of Student: _____ Teacher: _____

Name of Customer: _____

Phone Number: _____ E-Mail: _____

Treat selected: One per Class

- \$.55 Each Fresh Apple or Banana
- \$.55 Each Crazy Color Fruit Roll Up
- \$.70 Each Chocolate Ice Cream Cup
- \$.70 Each Double Chocolate Chip Muffin

Orders must be received one week in advance, and the payment must be received one day in advance.

Completed by the Manager

No. of Students in the Class _____ x _____ = Amount Owed:
\$ _____

Amount Paid on _____.

Allergies in the classroom: _____ (completed by Manager)

The Food Service Department at The City of St. Charles School District is committed to providing the highest quality service possible.