

REQUEST TO RESTRICT ACCESS TO STUDENT MEAL ACCOUNTS

Any student who comes into the cafeteria at nutrition or lunch and requests a meal will not be turned away.

The full cost of the meal will be charged to the student's account. Parents/guardians are responsible for resolving all valid charges on meals requested and received by the student.

If you would like to restrict access to your student's account for any reason, please complete and return this form via email, fax, or mail. An alert will be placed on the account(s) and other measures will be taken to restrict access. However, please be informed that students are always handed their plates before they reach the register in the cafeteria; once a meal has been served, it cannot be returned and your child(ren)'s account(s) will be charged the full cost of the meal.

It is imperative that parents/guardians inform their child(ren) of restrictions on his/her/their account(s).

Please call the Student Nutrition office at (818) 735-3203 or email cly@opusd.org if you have questions.

☐ My child(ren) listed below **MAY NOT** make purchases in the cafeteria or snack bar without my approval. I will provide my child with a note to hand to the cafeteria staff for each meal I have authorized. It is my responsibility to explain this to my child(ren).

Student's Full Name	
	<input type="checkbox"/> No purchases <input type="checkbox"/> With parental approval only
	<input type="checkbox"/> No purchases <input type="checkbox"/> With parental approval only
	<input type="checkbox"/> No purchases <input type="checkbox"/> With parental approval only
	<input type="checkbox"/> No purchases <input type="checkbox"/> With parental approval only

☐ My child(ren) listed below **MAY** purchase meals and/or a la carte snacks. The following spending and/or food restrictions apply. It is my responsibility to explain this to my child(ren).

Student's Full Name	Maximum Daily Spending Limit
	<input type="checkbox"/> \$_____ <input type="checkbox"/> Meals Only, No Snacks
	<input type="checkbox"/> \$_____ <input type="checkbox"/> Meals Only, No Snacks
	<input type="checkbox"/> \$_____ <input type="checkbox"/> Meals Only, No Snacks
	<input type="checkbox"/> \$_____ <input type="checkbox"/> Meals Only, No Snacks

Parent/Guardian Printed Name

Date

Parent/Guardian Signature