

**FORM E: LUNCH MONEY ACCOUNT AGREEMENT 2017-2018
(OPTIONAL)**

I, _____, am hereby agreeing to pay for lunches in the Juan Diego Academy cafeteria for my son/daughter, _____. I understand that after payment on my child's lunch account, each time he/she makes a purchase at lunch it will be deducted from the balance on this account.

I will instruct my son/daughter to be responsible with the money I deposit in this account.

If I pay directly from my checking account, there will be a \$35.00 NSF fee for funds returned by the bank for insufficient funds. At the discretion of the administration, it may be necessary to require all future payments be made in the form of credit card, cash, money order, or cashier's check.

If my child withdraws from Juan Diego Academy with a balance in his/her lunch money account, a refund will be issued within 10 days, upon my request of same.

If this account balance is depleted, your child will not be denied lunch for three days. However, if this account is not brought current within three days, we reserve the right to deny lunches.

My signature below states that I understand the lunch money account capabilities and will take responsibility for monitoring the balances and adding money as necessary. If this balance should fall in arrears, I will pay for any credit balance, should this occur.

Name of Student(s): _____

Student ID#: _____

Signature of Parent/Guardian: _____

Date: _____