



Pre-Paid Food Account

Camper's Name _____ Date _____

Amount of deposit to pre-paid account _____

Paid by Cash _____ Check # _____

***To pay by credit card, please complete a credit card authorization form*

Please list any restrictions (ie. no snacks to be purchased or a specific daily dollar amount) _____

Please Note: Breakfast may be purchased for \$1.50/day – includes drink
Lunch may be purchased for \$3.00/day – includes drink
Snack may be purchased for \$1/day – all snacks are \$1 and campers are only allowed to spend \$1 per day at snack time and \$1 at after care

If you have any questions, please contact Christine Grote via email
(cgrote@stphilipneri.org) or by calling 421-9392.