



## 2020 Eastern Synchronized Skating Sectional Championships

### Boxed Meal Order Form

Team Name: \_\_\_\_\_ Total Meals: \_\_\_\_\_

Primary Administrator (Name/CELL): \_\_\_\_\_

Team meals may be selected and scheduled for every day your team is at the arena.

**Please indicate which day you are ordering by checking box**

Wednesday, Jan.15	Thursday, Jan.16	Friday, Jan.17	Saturday, Jan.18

**Box Meals: \$12.00 per person** (all meals are subject to 8% sales tax and 18% administrative Charge\*)

\*This Administrative Charge is not intended to be a tip, gratuity, or service charge for the benefit of employees and no portion of this Administrative Charge is distributed to employees.

**Requested Pick-Up Time** \_\_\_\_\_

**Orders can be picked up at the Red Star Bar on the Arena Concourse- Section 102**

**Each Option Includes: Apple, Granola Bar, and Bottled Water**

**Meal Option 1:** Turkey, Swiss, Ciabatta Bread. **Quantity:** \_\_\_\_\_

**Meal Option 2:** Ham, Cheddar, Multigrain Roll. **Quantity:** \_\_\_\_\_

**Meal Option 3:** Hummus, Roasted Tomatoes, Zucchini & Broccoli, Balsamic, Wrap. **Quantity:** \_\_\_\_\_

**Meal Option 4:** Salad: Grilled Chicken, Mixed Greens, Grape Tomatoes, Dried Cranberry, Cucumber, Shredded Carrot, Balsamic Dressing. **Quantity:** \_\_\_\_\_

**All orders must be submitted by Wednesday, January 8<sup>th</sup>**

**Questions and Orders Should be submitted to Dan McKay at: [mckay-daniell@aramark.com](mailto:mckay-daniell@aramark.com)**

#### Credit Card Authorization Form

Card Type:    Visa    MasterCard    Discover    AMEX

Card Number: \_\_\_\_\_ Exp Date: \_\_\_\_\_ VC: \_\_\_\_\_

Card Holder's Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City, State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Card Holder's Signature: \_\_\_\_\_