



KINGSTON CATHOLIC HOT LUNCH MENU
Week of March 12th, 2018

NAME(S) & GRADE(S) _____

MONDAY

Pizza,
Veggie, Dessert

Yogurt,
Veggie, Dessert

TUESDAY

Turkey Sub,
Veggie, Dessert

Bagel W/Cream Cheese,
Veggie, Fruit

WEDNESDAY

Pulled Pork,
Veggie, Dessert

Yogurt, Veggie
Veggie, Dessert

THURSDAY

Chicken Tenders,
Veggie, Dessert

Bagel W/Cream Cheese
Veggie, Dessert

FRIDAY

NO SCHOOL

-
- Each lunch is \$4.00.
 - Please remember to put your child's name and grade on this menu.
 - Please remember to include your check.

A second slice of pizza may be ordered along with the first for an extra \$1.00 (unfortunately the "seconds for a dollar" option is not available with any other lunch).

LUNCH MENU MUST BE IN BY *FRIDAY* MORNING ALONG WITH PAYMENT –
THANK YOU FOR YOUR COOPERATION *Lunch menus will not be accepted*
on Monday morning so please plan accordingly

**KINGSTON CATHOLIC SCHOOL
WEEKLY SCHEDULE FOR Early Drop Off**

*Early Drop off time is 7:45am
The Cost is \$15 per week
Broadway Campus Only*

FAMILY NAME _____

March 12, 2018

WEEK OF _____

Parent/Guardian, kindly indicate in the appropriate box name and grade,
And please mark the days you need early drop off.

Child's Name & Gr. Mon. Tues. Wed. Thurs. Fri.

					No School
Early Drop Off Time					

RETURN TO SCHOOL BY **Friday** ALONG WITH PAYMENT.

PARENT SIGNATURE _____

KINGSTON CATHOLIC SCHOOL WEEKLY SCHEDULE FOR EXTENDED DAY PROGRAM

FAMILY NAME _____

March 12, 2018

WEEK OF _____

Parent/Guardian, kindly indicate in the appropriate box name, grade and pick-up time.

Please X the days you need aftercare.

Child's Name & Grade	Mon.	Tues.	Wed.	Thurs.	Fri.
					No School
Pick up time					

RETURN TO SCHOOL BY **Friday** ALONG WITH PAYMENT.

PARENT SIGNATURE _____

For those parents who need a receipt other than your check, fill in the form below and tear it off for your records. This will serve as your receipt for the aftercare program:



Kingston Catholic School Aftercare Receipt

Family Name: _____ Child's Name: _____

Week Of: _____ # of Days Used: _____

Amount Paid: _____ Cash _____ Check (Check #: _____)



Kingston Catholic School

Requests the pleasure of your company at the

Impact Awards Dinner

Friday, March 23, 2018

Best Western Plus

503 Washington Avenue Kingston, New York

Reception with Cash Bar from 6:00-7:00pm

Dinner at 7:00pm followed by Honoree Recognition and Acceptance

Please join us in acknowledging the contributions and *IMPACT* of our honorees:

Father Carl Johnson

Father Rick de la Peña

Mrs. Gail Diamond

Mr. Michael and Mrs. Christine Hein

Kingston Catholic School 2018 Impact Awards Dinner

I/We will attend with _____ tickets
at \$60/per person \$ _____

Dinner choices: _____ Penne ala vodka
_____ Rigatoni with broccoli,
garlic and olive oil
_____ Herb Roasted Salmon

Unable to attend, but would like to
make a tax deductible donation to
Kingston Catholic School of \$ _____

Please make checks payable to Kingston Catholic School

Responses requested by March 15, 2018

Please join with Kingston Catholic School in contributing to the success of the IMPACT Awards Dinner.

Journal Advertising Opportunities

- Full Page \$225.00 Half Page \$125.00
- Quarter Page \$75.00 Eighth Page \$40.00

Full Page 7.5 x 9.75 -- Half Page 7.5 x 4.75
Quarter Page 3.625 x 4.75 -- Eighth Page 3.625 x 2.25

Name: _____

Phone: _____

Email: _____

Please submit ad copy and payment to:

IMPACT Awards Journal, Kingston Catholic School
159 Broadway, Kingston, NY 12401

Email ad copy to: kcsimpactjournal@gmail.com

**Please return the completed form,
along with ad copy and payment by March 15, 2018.**