

ARAMARK CLASSROOM PARTY ORDER FORM

PLEASE PROVIDE 1 WEEK NOTICE

TIME OF EVENT: \_\_\_\_\_

No. OF STUDENTS \_\_\_\_\_

DATE OF EVENT: \_\_\_\_\_

POINT OF CONTACT: \_\_\_\_\_

BUILDING: \_\_\_\_\_

EMAIL: \_\_\_\_\_

CIRCLE ONE OF THE FOLLOWING OPTIONS:

OPTION 1: PIZZA PARTY

NUMBER OF CHEESE SERVINGS:

NUMBER OF PEPPERONI SERVINGS:

OPTION 2: SUB PLATTER

NUMBER OF TURKEY SUB SERVINGS:

NUMBER OF HAM SUB SERVINGS:

NUMBER OF 3 CHEESE SUB SERVINGS:

OPTION 3: "BBQ PLATTER"

NUMBER OF BEEF HAMBURGER SERVINGS:

NUMBER OF TURKEY HOT DOG SERVINGS:

SPECIAL REQUESTS:

PLEASE HAVE ALL STUDENT ID NUMBERS READY TO TURN IN WHEN PICKING UP ORDER.

PLEASE SUBMIT A SCANNED COPY OF THIS FORM TO: [BROWN-BRADLEY1@ARAMARK.COM](mailto:BROWN-BRADLEY1@ARAMARK.COM) AND [LUNA-ROSE@ARAMARK.COM](mailto:LUNA-ROSE@ARAMARK.COM)

PLEASE CONTACT BRADLEY BROWN, DIRECTOR OF STUDENT NUTRITION WITH ANY QUESTIONS:  
[BROWN-BRADLEY1@ARAMARK.COM](mailto:BROWN-BRADLEY1@ARAMARK.COM) OR 630-293-6060X5206

