

# UPHAM WOODS OUTDOOR LEARNING CENTER

## Food Service Agreement Form

Group Name: \_\_\_\_\_

Group Leader: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Group Phone: \_\_\_\_\_ Group Grade Range: \_\_\_\_\_

Group Dining Room Supervisor: **(1 Per Group)** \_\_\_\_\_

**Meal Times:** All meals are served at these times with the exception of the first and last meals. Please circle your breakfast time preference. If none circled, breakfast will be at 8:00 a.m.

Breakfast - 7:30 a.m. or 8:00 a.m.      Lunch - 12:00 p.m.      Dinner - 5:30 p.m.  
Please circle your breakfast preference

First Meal: \_\_\_\_\_ Last Meal: \_\_\_\_\_  
(Date / Time) (Date / Time)

**Estimated Meal Count:** (Insert the number of people to be served at each meal)

Day	Date	Breakfast		Lunch		Dinner	
		Y	A	Y	A	Y	A
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

Y = Youth (18 or younger)      A = Adult

**Special Diets, Food Allergies, or Vegetarians:** This form must be returned 30 days before arrival at camp. If you have specific dietary questions/concerns, you may call the Food Service Director at 608-254-6461, ext. 208.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Sack Meal:** (Indicate Date, Time, Meal and Number of Sack Meals Requested)

Date: \_\_\_\_\_ Pick Up Time: \_\_\_\_\_ Meal: \_\_\_\_\_ Number: \_\_\_\_\_  
 Sack Meal Includes: 1 Sub Sandwich, Fruit, Chips, Cookies, and Lemonade

**This FOOD CONTRACT is DUE 30 DAYS before arrival at Upham Woods.**

Meal count can be changed up to **10 calendar** days prior to arrival. If not changed, your estimated meal count will become your guaranteed number. You will be billed 5% less than your final count or actual participation whichever is greater. An increase greater than 5% above the guaranteed number is only permitted if the change is made at least 10 calendar days prior to arrival. Coffee & Tea are provided for adults from breakfast through dinner for groups purchasing meals. Food service is provided for groups of 20 to 150. Groups under 20 individuals will be charged for 20 if their group is the only group in camp using food service.

\_\_\_\_\_

*Group Leader*

\_\_\_\_\_

*Date*

## Snack List

### \$.55 Per Person Per Item Snacks

Apple (1)  
 Orange(1)  
 Popsicle (1)  
 Cookie - Chocolate Chip, Sugar (2)  
 Fruit Drink (1 8oz Cup)  
 Lemonade (1 8oz Cup)  
 Chocolate Milk

### \$.90 Per Person Per Item Snacks

Ice Cream Cup  
 Orange Juice (1 8oz Cup)  
 Brownie  
 Popcorn, Chips, Pretzels

### \$.70 Per Person Per Item Snacks

Veggies W/ Dip  
 Cake  
 Hot Chocolate

### Snack Order (If no snacks requested write none)

<u>Date</u>	<u>Time</u>	<u>Item 1</u>	<u>Item 2</u>

## Cookout Options

**Cookouts Available May 1 – Sept. 30. (1 cookout per group)**

Meats: Circle One (1): Hot Dog, Hamburger, Bratwurst, Sloppy Joes

Sides: Circle Three (3): Potato Chips, Baked Beans, Assort. Veggies w/ Dip, Fruit, Pasta Salad, Potato Salad

Dessert: Circle One (1): Cookies (Chocolate Chip, Sugar), Brownie, Popsicle, Vanilla Ice Cream Cup, Chocolate Ice Cream Cup, Orange Sherbet Cup

Beverage: Circle One (1): Lemonade, Fruit Drink, Tea  
 (Milk will be provided)

All cookouts include paper service, appropriate condiments, water, and the great outdoors.  
 (Weather permitting)

Cookout Date: \_\_\_\_\_

Cookout Meal (Circle One): Lunch or Dinner