



TERRY CONNERS SYNCHRO OPEN 2016

TEAM LUNCH BOX PRE- ORDER FORM

DEADLINE: NOVEMBER 30TH

Skater Name: _____

Team Name: _____ Team Level: _____

Team Contact Person: _____ Contact Cell Phone : _____

Pick Up Date: _____ Pick Up Time: _____

All Meals are \$9 per person

Check Your Skater's Option:

Italian Combo <input type="checkbox"/>	Wrap <input type="checkbox"/>	Roll <input type="checkbox"/>
Turkey <input type="checkbox"/>	Wrap <input type="checkbox"/>	Roll <input type="checkbox"/>
Ham <input type="checkbox"/>	Wrap <input type="checkbox"/>	Roll <input type="checkbox"/>
Tuna <input type="checkbox"/>	Wrap <input type="checkbox"/>	Roll <input type="checkbox"/>
Chicken Salad <input type="checkbox"/>	Wrap <input type="checkbox"/>	Roll <input type="checkbox"/>

Check Your Skater's Preferences:

Toppings:⇒	Lettuce <input type="checkbox"/>	Tomato <input type="checkbox"/>	
Condiments:⇒	Mustard <input type="checkbox"/>	Mayo <input type="checkbox"/>	
Choice of Cheese:⇒	American <input type="checkbox"/>	Cheddar <input type="checkbox"/>	
Chips Choice:⇒	Pretzels <input type="checkbox"/>	Plain Chips <input type="checkbox"/>	Doritos <input type="checkbox"/>
Drink Choice:⇒	Water <input type="checkbox"/>	Pepsi <input type="checkbox"/>	Brisk Tea <input type="checkbox"/>

Please make one check payable to: Rolling Dough Express

Any questions, please email: emarini@rollingdoughexpress.com

Return forms and one check to:

Christa Bemonte

38 Kenilworth Dr. West

Stamford, CT 06902

Thank you.