



Hempfield School District Food Services Department



LUNCH ACCOUNT REFUND APPLICATION Please select one of the options for lunch refunds.

Student(s) Name: _____

Building: _____

() I prefer to donate the balance for the benefit of another student(s) in the Hempfield School District.

() Transfer this balance to the student lunch account of: _____
School: _____

() Please send a refund for this amount: \$ _____
Make check payable to: _____
Mail to: _____

Signature

Date

*If you do not know if there is money owed to you please contact the Food Services office.

Hempfield Food Services
200 Church Street
Landisville, PA 17538
(717) 898-5566
Or
Email
brian_rathgeb@hempfieldsd.org
neysa_callahan@hempfieldsd.org