



Week Commencing: _____

Please return by **TUESDAY** to ensure your choices

Meals Service Autumn Menu – Week Two Menu

Name _____

Address: _____

Please select your meal by placing a tick next to one Main Meal (A or B or C) and Dessert, Two Fruits or Fresh Fruit. If you would like Soup please tick the applicable box.
Please return your completed menu to your driver.

Monday	
Please select one main meal	Please select one dessert
A <input type="checkbox"/> Tandoori Chicken with Butter Sauce	A <input type="checkbox"/> Apple & Date Crumble
B <input type="checkbox"/> Beef Goulash	B <input type="checkbox"/> Fresh Fruit <input type="checkbox"/> Two Fruits
C <input type="checkbox"/> Potato & Bacon Salad with Boiled Egg	<input type="checkbox"/> Italian Tomato & Basil Soup
Tuesday	
Please select one main meal	Please select one dessert
A <input type="checkbox"/> Slow Cooked Mediterranean Lamb Casserole	A <input type="checkbox"/> Coffee Pannacotta
B <input type="checkbox"/> Baked Salmon with Dill Sauce	B <input type="checkbox"/> Fresh Fruit <input type="checkbox"/> Two Fruits
C <input type="checkbox"/> Ham, Cheese, Tomato & Egg Salad	<input type="checkbox"/> Creamy Zucchini & Basil Soup
Wednesday	
Please select one main meal	Please select one dessert
A <input type="checkbox"/> Honey Pork Medallion with Mash Potato & Gravy	A <input type="checkbox"/> New York Baked Cheesecake
B <input type="checkbox"/> Beef Tortellini with Napoli Sauce	B <input type="checkbox"/> Fresh Fruit <input type="checkbox"/> Two Fruits
C <input type="checkbox"/> Chicken Pesto Pasta Salad	<input type="checkbox"/> Chicken & Vegetable Soup
Thursday	
Please select one main meal	Please select one dessert
A <input type="checkbox"/> Butter Chicken with Rice	A <input type="checkbox"/> Trifle
B <input type="checkbox"/> Roast Beef with Mash Potato & Gravy	B <input type="checkbox"/> Fresh Fruit <input type="checkbox"/> Two Fruits
C <input type="checkbox"/> Caesar Salad	<input type="checkbox"/> Carrot & Lentil Soup
Friday	
Please select one main meal	Please select one dessert
A <input type="checkbox"/> Fish of the Day	A <input type="checkbox"/> Chocolate Ripple Cake
B <input type="checkbox"/> Meatloaf with Gravy	B <input type="checkbox"/> Fresh Fruit <input type="checkbox"/> Two Fruits
C <input type="checkbox"/> Tuna & Coleslaw Salad	<input type="checkbox"/> Sweet Potato Soup

We value your feedback please turn over to give your feedback

