Meals on Wheels Menu (Sample)

Meals Service Spring Menu - Sample
Week Commencing:
Name: _____
Address: _____

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

MONDAY		
Please Select one Main Meal	**Please Select one Dessert**	
A ☐ **Roast Lamb with Orange Sauce**	A ☐ **Lemon Meringue**	
B ☐ **Chicken and Mushroom Risotto**	B ☐ **Fresh Fruit**	☐ **Stewed Fruit**
	☐ **Carrot and Coriander Soup**	

TUESDAY		
Please Select one Main Meal	**Please Select one Dessert**	
A ☐ **Roast Beef with Yorkshire Pudding**	A ☐ **Mini Individual Apple Pie**	
B ☐ **Sticky Sweet Chilli Baked Fish Fillet**	B ☐ **Fresh Fruit**	☐ **Stewed Fruit**
	☐ **Four Beans Soup**	

WEDNESDAY		
Please Select one Main Meal	**Please Select one Dessert**	
A ☐ **Butter Chicken and Rice**	A ☐ **Bread and Butter Pudding**	
B ☐ **Zucchini and Corn Fritter with Mash Potato and Tomato Relish**	B ☐ **Fresh Fruit**	☐ **Stewed Fruit**
	☐ **Kidney Bean Soup**	

THURSDAY		
Please Select one Main Meal	**Please Select one Dessert**	
A ☐ **Twice Cooked Pork Belly with Pineapple Relish**	A ☐ **Grapefruit Orange Cheesecake**	
B ☐ **Braised Steak with Sauce Diane**	B ☐ **Fresh Fruit**	☐ **Stewed Fruit**
	☐ **Country Vegetable Soup**	

FRIDAY		
Please Select one Main Meal	**Please Select one Dessert**	
A ☐ **Fish Tikka with Mint Sauce**	A ☐ **Pavlova Roulade**	
B ☐ **Ravioli Pasta with Rich Napoli Sauce & Garlic Bread**	B ☐ **Fresh Fruit**	☐ **Stewed Fruit**
	☐ **Cream of Chicken Soup**	

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	☐ **Cream of Chicken Soup**	

We value your opinion, please write any comments you have on our meals and the service we provide.

Thank you

Staff Name