

SNAP ACCOUNT DEPOSIT FORM for SCHOOL MEALS

Please complete one form for each prepayment that you make to your account.

Make check or money order payable to **ETHS Nutrition Services**.

Mail to: Nutrition Services, Evanston Township High School, 1600 Dodge Avenue, Evanston IL 60204

Your student may also bring this prepayment to any Food Court cashier during meal service.

PLEASE PRINT CLEARLY:

Student Name _____ Student ID # _____ OR Bar Code # _____

NOTE: ETHS Will Assess a \$30.00 Charge for Any Check Returned for Insufficient Funds

Amount \$ _____ Cash ___ Check / Number _____ (Include Student's ID # on Check)

PLEASE VISIT www.eths.k12.il.us TO PLACE AN ON-LINE CREDIT CARD PREPAYMENT. IT'S SIMPLE & SECURE!

Click on the Nutrition Services Department link to make a prepayment and check your student(s) account balance

OR

Contact the Nutrition Services Department at 847/424-7225 for assistance in placing an on-line prepayment

Account will be credited within one working day of receipt of payment.

NOTE: Return of unused funds will be made by check to parent/guardian only upon written request. {_____}

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