



Meal Order Change Request Form

Center: _____
Submitted By: _____
Submitted Date: _____

Starting the Week of: _____

<u>MEAL TYPE</u>	<u>#</u>
Hot Meals SCD – Congregate	
Hot Meals SCD – Home Delivered	
<u>TOTAL</u>	

Special Requests:

Form Instructions:

Submit all changes by 3:30 PM on Tuesday, in order to start the change, the next week. If you need to cancel meals due to the center being closed or request picnic meals*, list the change under the special requests section. *Note: picnic meals need a 30-day notice.

Submit completed form:

via email misty.richardson@westal.org
evet.hayes@westal.org

or

via FAX (205) 333-2713

or

via mail PO Box 509

Northport, AL 35476-0509