



# got catering?



## BREAKFAST

**Continental** – Includes breakfast bread, juice or fruit and coffee \$3.75/ per person  
You pick two--choose from a variety of Danish, assorted muffins and upscale deli bagels with cream cheese.

**Rise and Shine** – Build your own parfait \$4.50/ per person  
Yogurt served with granola, juice or seasonal fresh fruit, mini muffin and coffee.

## LUNCH

**Sandwich Galore** \$7.50/ per person  
Assortment of gourmet sandwiches, beverage, baked chips and a cookie.

**Tempting Greens** \$7.50/ per person  
Add one of the following salads to a beverage and a cookie.

Chicken Caesar- chopped romaine, sliced chicken breast, shredded parmesan cheese, croutons & Caesar dressing

Chef - chopped romaine, tomato, cucumber, turkey, ham, shredded cheese, croutons & ranch dressing.

Surfs Up- chopped romaine, sliced chicken breast, blue cheese crumbles, dried cherries, grape tomatoes, cucumbers served with ranch or balsamic vinaigrette dressing

## PARTY TRAYS

	serves 12	serves 25
Fresh Vegetables and Dip	\$20.00	\$38.00
Seasonal Fresh Fruit	\$30.00	\$50.00
Gourmet Cookie	\$9.50	\$17.00
Chocolate Chip Bars	\$15.75	\$30.00
Peanut Butter or Chocolate Brownies	\$15.75	\$30.00
Lemon Squares	\$15.75	\$30.00

## BEVERAGES

	serves 6-8	serves 25	serves 50	serves 100
Coffee – Regular or Decaf	\$10.00	\$30.00	\$55.00	\$100.00

### Individual Beverages

Gatorade, Vitamin Water, or Snapple . . . . .	\$1.75
Assorted Juices 12 oz . . . . .	\$1.50
Bottled Water 16.9 oz . . . . .	\$1.00
Assorted Soft Drinks (12 oz) . . . . .	\$1.25
Case of water (32 count). . . . .	\$15.00

## SPECIAL REQUESTS

Simple... Just call us! We do it all...from simple appetizers to hot and hearty buffet fare.

All prices include sales tax and delivery.  
SDUHSD Nutrition Services Department  
760-753-6241 x3426

# Nutrition Services Catering Order

PLEASE SEND COMPLETED ORDER FORM TO PAMELA BRAND, NUTRITION SERVICES

**Event Information** (Please complete a separate form for each function):

Event Name: \_\_\_\_\_ Date: \_\_\_\_\_ Day of Week: \_\_\_\_\_  
 Contact: \_\_\_\_\_ Phone/Ext #: \_\_\_\_\_ Site: \_\_\_\_\_  
 Estimated Attendance: \_\_\_\_\_ This is a: \_\_\_ Student Function OR \_\_\_ Adult Function  
 Location/Room: \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_ Set Up By: \_\_\_\_\_

**Continental Breakfast**  
 Number of total servings \_\_\_\_\_

Check two: \_\_\_ Danish  
 \_\_\_ Assorted Muffins  
 \_\_\_ Bagels with Cream Cheese

Check one: \_\_\_ Fruit  
 \_\_\_ Juice

COFFEE: \_\_\_ Regular \_\_\_ Decaf \_\_\_ Both

**Rise & Shine - Build your own Parfait!**  
 Number of total servings \_\_\_\_\_

Includes Yogurt with granola & a mini muffin

Check one: \_\_\_ Fruit  
 \_\_\_ Juice

COFFEE: \_\_\_ Regular \_\_\_ Decaf \_\_\_ Both

**Sandwiches Galore**  
 (Includes water, baked chips & a cookie)

	<u>Quantity</u>
The Mustang – Turkey	_____
The Maverick – Egg Salad	_____
The Bobcat - BLT w/avocado	_____
The Falcon – Tuna	_____
The Seahawk – Vegetarian	_____

If you would like extra, please indicate amount:  
 \_\_\_ Chips \_\_\_ Cookies \_\_\_ Water

**Tempting Greens**  
 (Includes water & a cookie)

	<u>Quantity</u>
Chicken Caesar	_____
Chef	_____
Surfs Up	_____

If you would like extra, please indicate amount:  
 \_\_\_ Chips \_\_\_ Cookies \_\_\_ Water

**Just Beverages**

COFFEE: \_\_\_ Regular \_\_\_ Decaf \_\_\_ Both  
 \_\_\_ For 6-8 \_\_\_ For 25 \_\_\_ For 50 \_\_\_ For 100

BEVERAGES: \_\_\_ Water by the Case (32)

\_\_\_ Water by the bottle

\_\_\_ Snapple assorted \_\_\_ Gatorade assorted

\_\_\_ Vitamin Water assorted

\_\_\_ Soda assorted \_\_\_ Diet Soda assorted

**Platters & Desserts**

	<u>Serves 12</u>	<u>Serves 25</u>
Fresh Vegetables & Dip	_____	_____
Seasonal Fresh Fruit	_____	_____
Gourmet Cookie	_____	_____
Chocolate Chip Bars	_____	_____
Chocolate Brownies	_____	_____
Peanut Butter Brownies	_____	_____
Lemon Squares	_____	_____

Additional information to help us make your event special : \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Billing Information:** PO Number: \_\_\_\_\_ Purchase Requisition Number: \_\_\_\_\_  
 ASB will be Paying: \_\_\_ Foundation will be Paying: \_\_\_ Personal Payment: \_\_\_

*Invoice will be forwarded post-event to Contact Person to approve payment.  
 Please initial and send to Finance Department upon receipt.*