

SaskMilk

School Milk Program

Registration 2019/2020

School: _____

Address: _____

Town/City: _____

Postal Code: _____

Phone: _____

Email: _____

Name of School Milk Coordinator: _____

Position of School Milk Coordinator _____

School Enrollment: (please fill in numbers and total)

Pre-K:	Grade 6:
Kindergarten:	Grade 7:
Grade 1:	Grade 8:
Grade 2:	Grade 9:
Grade 3:	Grade 10:
Grade 4:	Grade 11:
Grade 5:	Grade 12:
Total # of Students:	

Approximately how many students **stay** for lunch at school? _____

Who supplies milk to your school?

Saputo Fluid Division _____

Parmalat _____

Dairyland Home Service Driver _____

Local Store _____

Vending Machine _____

Other _____

If so through what company _____

School Milk Program Parent Pamphlet: These pamphlets are provided free of charge and are great ways to inform your parents about the program. Parent pamphlets will be mailed at the same time as program information & prizes, unless requested otherwise. **How many copies would you like mailed to your school?** _____

Electronic copy at <http://www.saskmilk.ca/media/1434/school-milk-brochure-sk-2018-sept.pdf>

Return your form via mail to:

School Milk Program Registration – SaskMilk
 444 McLeod Street
 Regina, SK S4N 4Y1
 Or fax to: 306.949.2605

Office Use: Web

Received: _____

Spirit Week: _____

Size: _____

Weight: _____

Mailed: _____

Once registered, watch for the arrival of your package containing program information and prizes 1-2 weeks before the program starts.