



Meal Plan Order Form

Delivery Information

Where would you like us to deliver?

Customer Name _____

Street Address: _____

City _____ Zip code _____

Tel # _____ Today's Date _____

E-mail _____

Date to be Delivered _____

Choosing A Meal Plan

Please circle the best meal type for you.

Healthy Favorites (our most popular home style meals)
or Healthy Heart (much lower in fat and sodium)

*Please circle the best plan for you
(Meals will be delivered once per week.)*

LUNCH ONLY

5 meals (\$42.50) 7 meals (\$59.50)

BREAKFAST AND LUNCH

5 meals (\$55.00) 7 meals (\$77.00)

Payment Options

*We will call you to confirm you order.
Your receipt will arrive with delivery.*

Check Enclosed (Payable to Lanakila Meals on Wheels)

Credit Card

Please circle: Visa MC Amex Discover

Credit Card #: _____

Exp Date: _____ Amt Charged: _____

Name on Card: _____

Billing address: _____

City _____ State/Zip _____

Signature _____

All proceeds support Lanakila Meals on Wheels and more!

Orders may be mailed or delivered to:

1809 Bachelot Street, Honolulu, Hawaii 96817.

For more information, call 531-0555.