

Carefully choose, mark (x) and complete your child or adolescent's age, gender, daily activity level & items you would like to order below...

BOY: AGE: 3-5 6-9 10-14 15-19

Breakfast Lunch Dinner (meal plans) (\$25.00ea.)
 Healthy Snack List Sweet Treat List (\$10.00 ea.)
 Healthy Food Criteria Substitution Sheet (\$10.00 ea.)
 Healthy Eating Behavior Modification Tip Sheet (\$10.00ea.)
 Sedentary (30 minutes or less)
 Moderate (45-60 minutes)
 Active (60 minutes or more)

GIRL: AGE: 3-5 6-9 10-14 15-19

Breakfast Lunch Dinner (meal plans) (\$25.00 ea.)
 Healthy Snack List Sweet Treat List (\$10.00 ea.)
 Healthy Food Criteria Substitution List (\$10.00 ea.)
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 Sedentary (30 minutes or less)
 Moderate (45-60 minutes)
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Food Allergies: (list all below or write the word NONE here: _____)

No/none my child has no known food allergies put an x here: _____

List any and all known food allergies here: _____

Your Name
(parent): _____

Your Child/Adolescent's
Name: _____

Address: _____
(street, house &/or apartment number)

City/State/Zip: _____

Phone# (area code): _____

Email
Address: _____

All orders are processed after credit card approval and sent to you via electronic email within 1-3 days. By placing your order you acknowledge & understand all terms, conditions, policies regarding healthy lifestyle meal plan orders. All sales are final and there are no refunds or exchanges. Be sure to fill-out and print this form accurately. One Potato Two Tomato is not responsible for orders or receipts not received due to extraneous circumstances beyond our control, such as (failed, inaccurate email addresses, declined or stolen credit cards, third party users, etc.) If a problem exists you can email our customer service dept. info@onepotatotwotomato.com Only completed order forms will be processed. "Live Healthy & Inspired" The One Potato Two Tomato Team.



www.OnePotatoTwoTomato.com
Kids Healthy Meal Plan/Menu's Order Form
Fax or Email completed order form(s) along with
credit card payment To:
516-484-2238 (fax)
Email: info@onepotatotwotomato.com

Credit Card & Payment Information

PLEASE NOTE:

When ordering meal plan(s) & other items for 2 or more people please print & fill-out a *separate order form* for each child &/or adolescent to help ensure the accuracy of your order. Thank You!

Add up your meal plan(s), other items you have chosen on the lefthand side of this order form and write your complete order dollar (\$) amount below:

Order Total \$: _____

If you ordered all of our Breakfast, Lunch & Dinner meal plans, We will include our Healthy food criteria substitution & Healthy Eating Behavior Modification Tip Sheets. A \$20.00 value, yours FREE for ordering all 3!

Credit Card Type: Master Visa

CC #: _____

ExpDate: _____ CVV Code: _____

Cardholder
Name: _____

Total Credit Card Charge Amount:
\$ _____

Cardholder
Name: _____
(print clearly)

Cardholder Signature (Sign on line below):

Today's Date: _____