



2026 FIRST Regional Robotics Competition
Boxed Meal Order Form

Team Number: _____ Total Meals: _____

Primary On Site Contact (Name/CELL): _____
Team meals may be selected and scheduled for every day your team is at the arena.

Please indicate which day you are ordering by checking box

Table with 3 columns: Thursday, April 16th; Friday, April 17; Saturday, April 18

Box Meals: \$17.50 per person (all meals are subject to 8% sales tax and 18% administrative Charge*)
*This Administrative Charge is not intended to be a tip, gratuity, or service charge for the benefit of employees and no portion of this Administrative Charge is distributed to employees.

Requested Pick-Up Time _____

Orders can be picked up at the Eat Drink Taco Stand on the Arena Concourse- Section 102
PLEASE Bring your team or enough people to carry your order at the REQUESTED PICK UP TIME

Each Option Includes: Chips, Granola Bar, Whole Apple and Bottled Water

- Meal Option 1: Turkey, Swiss, Ciabatta Bread. Quantity: _____
Meal Option 2: Ham, Cheddar, Multigrain Roll. Quantity: _____
Meal Option 3: Hummus, Roasted Tomatoes, Zucchini & Broccoli, Balsamic, Wrap. Quantity: _____
Meal Option 4: Salad: Grilled Chicken, Mixed Greens, Grape Tomatoes, Dried Cranberry, Cucumber, Shredded Carrot, Balsamic Dressing. Quantity: _____

All orders must be submitted by Tuesday, April 7th @4pm
Questions and Orders Should be submitted to Marla Ortega at: Ortega-marla@aramark.com

Credit Card Authorization Form

Card Type: Visa MasterCard Discover AMEX

Card Number: _____ Exp Date: _____ CVC: _____

Card Holder's Name: _____

Billing Address: _____

City, State: _____ Zip Code: _____

Card Holder's Signature: _____