



ALMA Night-Time Dinner Form

NOMBRE/NAME: _____

FECHA/DATE: _____

TEAM _____

RUT: _____

Escoja una de las 3 Opciones/Choose either:

**PLATO DE FONDO /SUPPER:
VEGETARIANO**

**ENSALADA/SALAD:
VEGETARIANO**

SANDWICH:

PAN/BREAD: MOLDE NORMAL

INTEGRAL/WHEAT

MANTEQUILLA/BUTTER	
MAYONESA/MAYONAISE	
JAMON/HAM	
QUESO/CHEESE	
PAVO/TURKEY	
ATUN/TUNA	
CHURRASCO/MEAT	
HUEVO/EGGS	
TOMATE/TOMATO	
LECHUGA/LETTUCE	
PALTA/AVOCADO	

KETCHUP	
MOSTAZA/MUSTARD	
AJI/CHILLI	

**Please choose either dessert, yogurt or fruit.
Please choose either chocolate, chips or cookies.**

POSTRE/DESSERT	
YOGURT	
FRUTA/FRUIT	
BEBIDA/SODA	
LECHE/MILK	
CHOCOLATE	
PAPAS FRITAS/CHIPS	
GALLETAS/COOKIES	

COKE	DIET COKE	SPRITE	
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E-mail this form to mramos@alma.cl and cmondaca@alma.cl before 3pm for the same evening.