



Cashless Lunch Refund Form

Fax to – Caterlink Ltd – 01892 825003

Post to Caterlink Ltd, Hop House, Lower Green Road, Pembury, Kent, TN2 4HS

Email to - meals@caterlinkltd.co.uk

Childs full name	
Childs class	
School Name	
Reason for Refund	
Date affective from (last meal taken)	
Balance transfer – if you wish the funds to be transferred to a sibling in the same school, please provide Full Name, Class and ID number of pupil	
Home Address	
Contact phone number	
Parent / Guardian contact name	
Payment be made payable to	
Account number	
Sort Code	

Signature of claimant

Date

Office use only –

Date received -

Amount issued - £

Date Account closed -

Date cheque / BACS / transfer posted –

Processed by -