

CLIFF WOLD'S PRE-CANOE TRIP CHECK SHEET AND MENU SELECTION FORM FOR SUPER DELUXE CANOE TRAIL MEALS



**Fill out and MAIL TO: CLIFF WOLD'S, 1731 E. Sheridan, Ely, MN 55731 or CALL IN
(218) 365-3267 at least 72 hours before you are to arrive for your trip.**

Name of Leader _____	Leader's Home Town _____	Leader's Phone No. _____
Date of Arrival at Cliff Wold's in Ely _____	Estimated Time of your Arrival _____	Exact Date Group will Leave the canoe Landing _____

FOR PACKING YOUR EQUIPMENT AND FOOD, FILL IN THE FOLLOWING:

No. Days Contracted on Canoe Trails _____	Number of women or teenage girls _____	Number of male adults _____	No. of teenage boys under 19 _____	Number of children 6 to 12 _____	Number under 6 _____	Total Number of people _____
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INSTRUCTIONS: Place the day or days on the Canoe Trails you wish a particular meal served in the space or spaces to the left of the title. For example, if you wish "PANCAKES & BACON" the first morning on the Canoe Trails, place a "1" in the first space to the left. If you want "PANCAKES & BACON" served a second time, say the fifth day, place a "5" in the second space to the left. Due to spoilage "FRESH EGGS & SAUSAGE LINKS" may be served only the first morning.

YOUR CHOICE OF EIGHT CUSTOM PACKED DELUXE CANOE TRAIL BREAKFASTS:

If staying overnight before your trip at our campground-bunkhouse area and you wish to have a "Quick Breakfast" of dry cereals, milk, roll, coffee delivered to the site that morning at extra cost, check here: _____

- | | | | |
|---|---|--|---|
| ___ *FRESH EGGS & SAUS. LINKS, toast, jelly, margarine, coffee, tea, and/or hot chocolate | ___ OATMEAL & APPLESAUCE with milk, sugar, coffee, tea, and/or hot chocolate | ___ SCRAMBLED EGGS with BACO BITS, hash browns, coffee, tea and/or hot chocolate | ___ BLUEBERRY PANCAKES & BACON, maple flavored syrup, coffee, tea, and/or hot chocolate |
| ___ *FRESH EGGS & BACON, hash browns, toast, jelly, coffee, tea, and/or hot chocolate | ___ PANCAKES & BACON, maple flavored syrup, coffee, tea, and/or hot chocolate | ___ GRANOLA & FRUIT with milk, coffee, tea, and/or hot chocolate | ___ FRENCH TOAST & BACON maple flavored syrup, coffee, tea, and/or hot chocolate |

Indicate mornings juice is to be added: _____	Indicate number of coffee drinkers: _____	Who use Cream: _____	Who use sugar: _____	Who use de-caf coffee: _____	Number of Tea Drinkers _____
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For breakfast indicate the number of people wanting Hot Chocolate: _____

*Please select for the first morning on the Canoe Trails only. Because of breakage, a second breakfast of fresh eggs should not be selected later than the third day on the Canoe Trails.

YOUR CHOICE OF EIGHT EASY TO PREPARE CUSTOM PACKED DELUXE QUICK LUNCHES:

- | | | | |
|--|---|---|--|
| ** ___ HAM & CHEESE sandwiches, peanut butter & jelly sandwiches, fruit flavored beverage, coffee, tea, dessert | ___ CHEESE SANDWICHES, peanut butter & jelly sandwiches, fruit flavored beverage, tea, coffee, dessert | ___ CHEESE CHUNKS, peanut butter & jelly sandwiches, fruit flavored beverage, coffee, tea, dessert | ___ CREAM OF CHICKEN SOUP, peanut butter & jelly sandwiches, fruit flavored beverage, coffee, tea, dessert |
| ** ___ LUNCH MEAT & CHEESE sandwiches, peanut butter & jelly sandwiches, fruit flavored beverage, tea, coffee, dessert | ___ SAUSAGE SANDWICHES, peanut butter & jelly sandwiches, fruit flavored beverage, coffee, tea, dessert | ___ SAUSAGE CHUNKS, peanut butter & jelly sandwiches, fruit flavored beverage, coffee, tea, dessert | ___ BEEF JERKY & TRAIL MIX peanut butter & jelly sandwiches, fruit flavored beverage, coffee, tea, dessert |

**Recommended for first or second day only . . . All sandwiches containing cheese may be grilled.

Indicate the amount of the kinds of bread you wish packed for lunches (all - 1/4 - 1/2 - etc.)

White Bread _____	Whole Wheat _____	Cinnamon Raisin _____
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YOUR CHOICE OF TWELVE CUSTOM PACKED DELUXE DINNERS:

- | | | | |
|---|--|--|--|
| * <input type="checkbox"/> FRESH FRIED CHICKEN,
mashed potatoes, gravy,
vegetable, coffee, tea
fruit flavored beverage,
coffee, dessert | ** <input type="checkbox"/> HAM DINNER, mashed
potatoes, vegetable,
<input type="checkbox"/> tea, coffee, and/or
fruit flavored beverage,
coffee, tea, dessert | <input type="checkbox"/> CHICKEN & RICE
vegetable, coffee,
<input type="checkbox"/> tea, and/or fruit
flavored beverage,
dessert | <input type="checkbox"/> BEEF STEW
coffee, tea and/or
<input type="checkbox"/> fruit flavored beverage,
dessert |
| * <input type="checkbox"/> 6 OZ. RIB EYE STEAK,
hash browns, vegetable,
tea, coffee, fruit flavored
beverage, dessert | ** <input type="checkbox"/> POLISH SAUSAGE, mashed
potatoes, vegetable, tea,
<input type="checkbox"/> coffee, fruit flavored
beverage, dessert | <input type="checkbox"/> MEAT STROGANOFF,
vegetable, tea,
<input type="checkbox"/> coffee, fruit flavored
beverage, dessert | <input type="checkbox"/> CHICKEN A LA KING
with noodles, tea,
<input type="checkbox"/> coffee, fruit flavored
beverage, dessert |
| * <input type="checkbox"/> GROUND BEEF, hash
browns, vegetable, tea,
coffee, fruit flavored
beverage, dessert | <input type="checkbox"/> BEEF & GRAVY over
mashed potatoes,
<input type="checkbox"/> vegetable, coffee,
tea, fruit flavored
beverage, dessert | <input type="checkbox"/> MEAT & SPAGHETTI,
vegetable, coffee,
<input type="checkbox"/> tea, fruit flavored
beverage, dessert | <input type="checkbox"/> MACARONI & CHEESE
vegetable, coffee,
<input type="checkbox"/> tea, fruit flavored
beverage, dessert |

Cross out any beverages not wanted for the evening meal: Coffee, Tea, Fruit flavored beverage.

*Recommended for the first dinner only . . . **For the first or second day only. Please note: Our hash browns reconstitute by simmering just a few minutes.

YOUR CHOICE OF, IF DESIRED, CUSTOM PACKED DELUXE STEAKS INSTEAD OF 6 OZ.: (Place number wanted in space to left)

- * 8 oz. RIB-EYE STEAK (at extra cost) * 10 oz. RIB-EYE STEAK (at extra cost)

NOTE: A staples bag will be packed containing seasonings, extra punch, coffee, tea, sugar, shortening, etc. Plus the following for your evening snacks as desired:
Give number of times you'd like any of the evening snacks: Popcorn And for those who want to bake: Brownie Mix , and/or Nut Bread Mix
Check the amount of shortening and fish mix
for frying fish you want packed for your group: None Average Amount Ample Amount

LEADERS, PLEASE NOTE: Do not forget to bring for each cooking and camping group of from 2 to 9 people A FIRST AID KIT, ANY SPECIAL ROPE, A COMPASS and if desired, a pliers and file. Please inform us of any other dietary needs.

Date signed _____ Year _____
Signature of group leader _____