Recipe Submission Form
CCHS 50 Years Cookbook

(Please Type or Print only one recipe per page – No more than 3 recipes per Family)

RECIPE TITLE _____

Name of Contributor: _____

Phone #: _____ **Email:** _____

TIME NEEDED FOR RECIPE: _____

 # OF PEOPLE IT WILL FEED: _____

BELONGS TO the FOLLOWING CATEGORY

FROM *Tonight's Menu* "*Food & Memories*" SECTION ON WEBSITE

_____

Recommended Abbreviations

Cup…….c
Teaspoon…….tsp
Tablespoon…….tbsp
Package…….pkg
Quart……qt
Pint…….pt
Gallon…….gal
Ounce…….oz
Inch…….in
Pound……lb
Fahrenheit…….F

MARK THE FOLLOWING THAT APPLY

☐ Hot/Spicy
☐ Quick & Easy
☐ Multicultural
☐ Low Fat
☐ Vegetarian
☐ In Loving Memory of

_____

☐ 30 minutes
☐ Special Memory/Item of Interest Below

INGREDIENTS

(List in order used in Recipe)

_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____
_____ _____

DIRECTIONS

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

MISCELLANEOUS
(Notes, Hints, Healthy Substitutions, etc…)

SPECIAL MEMORY/ITEM OF INTEREST
Family Background/ Special Occasion/ Fond Memory of CCHS School Days

I hereby contribute this family favorite recipe for the CCHS Cookbook.

Signature **Date**

COOKBOOK RESERVATION ORDERS

If you would like to reserve copies of the Charlotte Catholic Cookbook before they are printed, please complete this form with enough information so that we may contact you.

Your Name: _____ # of copies/cartons (6 per carton) _____

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Best Way to Contact: _____