

# LUNCH

please tick (✓) to indicate your choice  
 guests to use the  to indicate your choice  
 \*guest meal charges will apply

## Soup

- Vegetable Soup of the Day **(G,D on request)**
- Tom Kha Chicken and Coconut Soup **(D)**  
 served with  Bread Roll  Rice Bowl **(G,D)**

## Mains

Please choose one of the following:

Homemade Ciabatta **(G on request)**

with your choice of filling:

- Tuna and Lemon Mayonnaise with Cucumber **(D on request)**
- Chicken Salad Sandwich **(D on request)**
- Brie and Pear Chutney **(V on request)**

- Chicken Teriyaki with Braised Ginger Rice and Sautéed Vegetables **(D)**
- Soba Noodle Salad with Soy and Ginger Dressing **(D)**
- Roasted Cauliflower, Quinoa Salad with Green Tahini Dressing **(G,D)**
- Quiche Lorraine with Warm New Potato Salad
- Beef Mince Bulgogi Bowl with Salad **(G,D on request)**

## Dessert

- Seasonal Fruit

Afternoon Tea will be served from the trolley

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Room Number: \_\_\_\_\_

Dietary Requirements:

\_\_\_\_\_

\_\_\_\_\_

Meal Received: \_\_\_\_\_

# DINNER

## Mains

Please choose one of the following:

- Butter Chicken, Pilaf Rice, Raitziki Yoghurt **(G)**
- Lentil Dhal, Pilaf Rice, Raitziki Yoghurt **(G,D on request)**
- Beef Brisket Stroganoff, Garlic and Herb Roasted Potatoes, Sautéed Broccoli, Pickles **(G)**
- Pulled Pork with Homemade BBQ Sauce, Roasted Kumara Wedges, Summer Slaw **(G,D on request)**
- Smoky Eggplant Pasta topped with Roasted Tomatoes **(D)**
- Mixed Mushroom Risotto finished with Compound Herb Butter **(G)**

## Dessert

Please choose one of the following:

- Crème Brulee **(G)**
- Biscoff Cheesecake
- Ice Cream **(G)**

## Refreshments

- Orange Juice
- Wine can be purchased at your request*
- Sauvignon Blanc \$12.00
- Merlot \$12.00

"You should avoid drinking alcohol while you're breastfeeding. This is particularly during the first month, when breastfeeding is being established"

Supper will be served from the trolley

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Room Number: \_\_\_\_\_

Dietary Requirements:

\_\_\_\_\_

\_\_\_\_\_

Meal Received: \_\_\_\_\_

G – Made without Gluten, D – Made without Dairy, VG – Vegan, V – Vegetarian

# BREAKFAST

## Yoghurt

- Fruit Yoghurt  Plain Yoghurt

## Fruit

- Peaches  Pears

## Cereal

- Weetbix **(G on request)**
- Cornflakes **(G on request)**
- Rice Cereal
- Porridge with Stewed Apple Cinnamon Compote
- Multigrain Congee **(VG)**

## Toast

- White Toast  Wheatmeal Toast

## Refreshments

- Coffee  Milk
- Tea  Orange Juice
- Herbal Tea

## Hot Meal Option

- Bacon and Poached Eggs on Toast **(G)**
- Poached Eggs on Toast

Please complete your menu and return it to the catering staff by 9:30 am so we can confirm your choice.

Morning Tea will be served from the trolley

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Room Number: \_\_\_\_\_

Dietary Requirements:

\_\_\_\_\_

\_\_\_\_\_

Meal Received: \_\_\_\_\_

