

Center School Scrip Fundraiser Order Form

Contact person: **Theresa Evans** tbsevans@gmail.com or 978-453-9467

Your Name: _____

Phone: _____ E-mail: _____

Child's Name: _____ Class: _____

Teacher: _____

GIFT CARD DESIRED :	Cost:	Quantity:	Total:
---------------------	-------	-----------	--------

example Applebees	\$25	3	\$75
----------------------	------	---	------

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

Total Number of cards ordered:

Total cost:

Please choose one: Yes, I would like my order to come home in my child's backpack
 No, I do not want my order in my child's backpack. I would like to pick them up at school.

PLEASE MAKE CHECKS PAYABLE TO: CSPTO (Center School PTO)