CLASSROOM CELEBRATION
ORDER FORM

Submit completed form and payment to School Café at least 2 days in advance of celebration *contact School Cafe Manager to confirm product availability

Child's Name: ______________________________
Teacher's Name: ______________________________
Date of Celebration: __________________________
Contact Person: ______________________________
Phone #: ______________________________

Circle Order Preference:

Sour Cherry-Lemon Slushie $20.00
Strawberry-Mango Slushie $20.00
Blue Raspberry-Lemon Slushie $20.00
Assortment of Slushie $20.00
Birthday Cake Frozen Yogurt $20.00
Pre-Packed Cookies $15.00

Deluxe Classroom Treat $32.00 per class
Includes Chocolate Chip Cookies & Frozen Treat

Select form of payment:
Cash        Check        Child's General Account

(For Office Use Only)
Date of Deposit: _______ Treat Qty: _______ Celebration Time: _______

Manager, keep this order form for your records.