Oldmans Township School PTA Scrip Program

Order Form

Name:_____ Order Date:_____

Child's Name:_____ Grade:_____ Check #_____

Send home with student? Yes NO (Circle One) Pick up ? Yes No (Circle One)

Product	Amount	Quantity	Total	%
Example: Bath and Body Works	*$25.00*	*5*	*$125.00*	*13*

Thank you for your participation . Visit www.oldmans.org/pta/calendar for due dates. If you have any questions, please call Peggy Kirsch at 299.6352. Please make checks payable to Oldmans Township School PTA