

Please submit this form, including ONE check made payable to SCLS PTO
by Wednesday, October 4

Youngest Child's Name: _____

Grade & Section: _____

Catalog Orders Amount: \$_____ (check is enclosed)

Please return the white and yellow order form copies and keep the pink copy for your records

_____ I acknowledge that I am aware the pickup date for these items is Thursday, November 9 from 3:30-6:30 in the gym, and that refrigerated items cannot be left at SCLS past the pickup time

KidStuff Books: Number of books needed: _____ Amount: \$_____ (check is enclosed)

Total of all sales: _____ (Must be \$125 or more)

_____ I choose to do the buyout for \$75 (check is enclosed)

_____ I am returning the KidStuff Book

_____ I am paying \$25 for the KidStuff Book that was sent home

Contact Name (Print): _____

Contact Signature: _____

Contact Phone Number: _____

Thank you for your participation!