CLASSROOM CELEBRATION ORDER FORM

submit completed form and payment to School Cafe 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 #:
Frozen Treats for entire classroom: $20.00

CIRCLE FROZEN TREAT FLAVOR PREFERENCE:

SOUR CHERRY-LEMON SLUSHIE
STRAWBERRY-MANGO SLUSHIE
BLUE RASPBERRY-LEMON SLUSHIE
ASSORTMENT OF SLUSHIE
BIRTHDAY CAKE FROZEN YOGURT

Classroom Celebrations can now be purchased using funds from your child’s GENERAL lunch account!

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.