

Trinity Catholic School



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Christmas Concert – December 16 2009

DVD ORDER FORM

(Please submit orders by _____)

Child's Name _____

Grade _____ Teacher _____

Parent's Name _____

Home Phone #: _____ Cell Phone #: _____

*Email address: _____
(Needed for updates and communications about dvds)

_____ (qty) x \$10 each = \$ _____ total

Please make checks payable to: Trinity Catholic School

NOTES:

- All sales benefit and go to Trinity Catholic School
- DVD's will be delivered to your child at school. (1ST come, 1ST serve)
- Feedback welcome, email Mrs Randall at: tnj2303@hotmail.com
- To Re-Order: Send form or call Mrs Randall at: 229-3831

PLEASE DO NOT WRITE BELOW LINE – THANKS ☺

Date OFFICE rec'd _____ Notes: _____

Date TRISH rec'd _____ Cash/Check # _____ \$Amt: _____ Notes: _____

Delivered _____ Notes: _____ \$Batch# _____ To Cecile _____