

**Holy Family PTO**  
**Gift Card Order Form**

First Name	Last Name
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Mailing Address

City/State/Zip	Phone
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Email

Preferred method of contact: \_\_\_\_\_

Child's Name/Grade/Teacher (if applicable)

Retailer	Denomination	Quantity	Total \$ Amount
Method of Payment:		Total Amount Enclosed:	

Deliver Options for your order (check one):

\_\_\_\_\_ Send order home with my child who is a student at Holy Family School.

\_\_\_\_\_ I will pick up the cards at Holy Family School Main Office, 17 Prospect St., Norwich, NY 13815.

Order Forms can be sent to the HFS Main Office, or emailed to [hfsptoscrip@gmail.com](mailto:hfsptoscrip@gmail.com). All orders must be accompanied with cash or check payment. **Make checks payable to Holy Family PTO with SCRIP in memo.** *A \$35 returned check fee will be applied to any returned checks.*