



The HILLSIDE SCRIP Order Form

~ Good for your school | Great for your wallet! ~

First time orders, please complete this form in its entirety and send it along with your check made payable to "HILLSIDE PTO" in your child's folder in an envelope addressed to: HILLSIDE SCRIP Program.

If you have no changes to your account, fill in your name and skip to the order section of this form.

_____ Date

_____ Name

_____ Child's Name

_____ Home Phone #

_____ eMail Address

_____ Child's Grade / Room #

_____ Mobile Phone #

_____ Home Address

_____ City, State

_____ Zip

PLEASE ORDER

Quantity	Denomination	Product Name	Total
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

TOTAL AMOUNT INCLUDED: _____

A word of thanks: We value your patronage and look forward to helping you contribute money to the Hillside PTO which benefits and enhances education for your family & its community!

CONTACT US ~ WE'RE HERE FOR YOU!

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HILLSIDE's Website, select: **FAMILY INFO | SCRIP** or email Maureen.Mitchell@comcast.net
 or shop @ **ShopWithScrip.com** (use enrollment code:8581876738265 when prompted)
 or call **Maureen Mitchell @ 856-297-8943**