

TRIP Order Due Date: Friday, 9:00am in the school office
 TRIP Delivery Date: Friday

Local Order Form

Last Name _____ First Name _____

Phone # _____ Date Ordered _____

Child Name _____

Local Order

Retailer	%	Qty	Total
Alsip Home & Nursery \$10 / \$25 / \$50 / \$100	10%		
Gino's Steakhouse \$50 / \$100	10%		
*La Quesadilla. \$25 / \$50 / \$100	10%		
Rob's Meat Chop \$25 / \$50 / \$100	10%		
Round the Clock (Schererville). \$20	10%		
Spa Nails (St. John only) \$25 / \$50 / \$100	20%		
Strack & Van Til's \$25 / \$50 / \$100	3%		
Walt's \$25	3%		
Welch's Stop & Shop \$25 / \$50 / \$100	10%		
Total Local Order:			\$

Please Fill In:

Check # _____

Local \$ amount _____

TOTAL \$ amount _____

*Gift Cards and Coupons may not be use together at La Quesadilla. Thank you for your cooperation.