

## GIFT CARD ORDER FORM

Complete this form and email to [parentsguild@academyolmc.org](mailto:parentsguild@academyolmc.org).

Ordered by: \_\_\_\_\_ . Date: \_\_\_\_\_ Email: \_\_\_\_\_

Student \_\_\_\_\_ Student Grade: \_\_\_\_\_ Phone: \_\_\_\_\_

All giftcards below earn 5% rebate earnings towards family goal of \$125/schoolyear.

STORE GIFTCARD & FACE VALUE	FACE VALUE	QUANTITY	AMOUNT DUE
Shoprite	\$50		
Shoprite	\$100		
Stop n Shop	\$25		
Stop n Shop	\$50		
Stop n Shop	\$100		
Wegman's	\$25		
Wegman's	\$50		
King's	\$100		
King's	\$25		
King's	\$100		
Acme/Safeway	\$25		
Acme/Safeway	\$50		
Acme/Safeway	\$100		
Starbucks	\$10		
Bath N Body Works	\$10		
<b>TOTAL</b>			