

(Please fold your payment into this envelope, secure with staples or tape, and turn in at drop off or office.)

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## Popcorn Order and Payment Form

Name: \_\_\_\_\_ Grade(s): \_\_\_\_\_

(Only have one student's name on an order form. If you want to order for several students please turn in several separate order forms.)

Date: \_\_\_\_\_

How many bags of popcorn do you want each week? \_\_\_\_\_ x \$1.50 = \_\_\_\_\_

How many weeks? x \_\_\_\_\_

**Total** = \_\_\_\_\_

How did you pay? Circle your answer.

Exact change,

Check,

Credit at office (receipt enclosed)

Check in the following boxes if you want salt or nutritional yeast:

Salt?

Nutritional Yeast?

Thank you for supporting us and remember to stay safe!

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# Popcorn