

Items required by teacher and to be ordered if you do not already have them

Description	Qty. Req'd	Price	Qty. Ordered	Subtotal
Facial Tissue - 126 Sheets	1	2.16		
Indoor Shoes (non-marking) - Purchased Elsewhere				
Lunch Kit - Purchased Elsewhere				
Complete Change of Extra Clothing - Provided by Parents				
Back Pack - Purchased Elsewhere				
Change of Clothes in a Ziploc bag labelled with name *Please write your child's name on their belongings* *Most items will be pooled for whole class (label shoes & snack bags only)*				
Cost of Items		(prices include tax)		\$
Shipping				\$ 6.50
Total Cost of Items + Shipping		(prices include tax)		\$

Contact Info / Payment

Student Name (label to appear on supply box) _____ Phone Number _____ Email (summer contact info) _____

By Credit Card Payment: Visa Mastercard Cheque (made payable to: School Start)

Card Number _____ Expiry Date _____ \$ _____
Name as it appears on card _____ Signature _____ Amount

Your Order Will Be Delivered To Your Home. Please provide your house and street address. No P.O. Boxes.

Address _____ City _____ Province _____ Postcode _____