

Saint Joseph Grocery Gift Card Program

Customer: _____ Phone # _____

Address: _____ Check # _____

Processed By: _____ Date: _____

Grade(s) to be Credited: _____ **Each of your children's grades will get credit for the total of your order!**

Shop Rite

_____ x \$100.00 = _____ Serial #'s: _____

_____ x \$50.00 = _____ Serial #'s: _____

_____ x \$25.00 = _____ Serial #'s: _____

Pathmark

_____ x \$100.00 = _____ Serial #'s: _____

_____ x \$50.00 = _____ Serial #'s: _____

_____ x \$25.00 = _____ Serial #'s: _____

Kings

_____ x \$50.00 = _____ Serial #'s: _____

_____ x \$25.00 = _____ Serial #'s: _____

Stop & Shop

_____ x \$100.00 = _____ Serial #'s: _____

_____ x \$50.00 = _____ Serial #'s: _____

Total: _____

- Gift cards may be purchased during the week by sending in completed order forms, along with your check, attention: Maria-Rose Contini, Library. Your order will be returned with your child the next day.
- Gift cards may be purchased in the Lower School Office on Wednesday mornings from 8:00-8:30 am.
- Please make checks payable to St. Joseph School. **(Cash accepted for in person purchases only).**

For orders sent to school, the following authorization must be completed.

Authorization Release:

I authorize the release of my grocery gift certificate order to my child. I understand that St. Joseph School will not be liable for any grocery certificates that may be lost after the completed order is given to my child.

Parent Signature: _____

Student Name: _____ Class: _____