2018-2019 Blochman Yearbook Order Form

Please return this completed form and payment to your child's teacher or Mrs. Rapp
*Do not send to the office

Student's Name: _____ Grade: _____

Parent/Guardian Name(s): _____ Phone Number: _____

Address or P.O. Box: _____

E-mail: _____

*Return the completed form and payment to your child's teacher or Mrs. Rapp Do not send to the office.

Yearbooks purchased before Feb. 16, 2019 will cost $15.00.

*After Feb. 19, 2019 yearbooks will cost $20.00 *

Exact Change is appreciated.

I would like _____ yearbook(s) for $_____.

I would like to be a Yearbook Supporter for $6.00_____
Thank you for your donation. Your name will be mentioned in our yearbook.

_____I would like to purchase a yearbook dedication. ___$40 ___$30 ___$25
Please see reverse side for details and form.

_____I would like to purchase a Love Line. ____$5
Please see attached form.

Payment Information (circle one): Cash Check $_____
Exact Change is appreciated. *Amount Paid*

Please make all checks payable to Blochman Union School District.

*Return the completed form and payment to your child's teacher or Mrs. Rapp Do not send to the office.

For Yearbook Staff Use Only

Date Received _____ *Receipt #* _____
Total Payment _____ *Check #* _____

If you have an questions, please contact Mrs. Rapp srapp@blochmanusd.org
Thank you for your support!