

CMS Order Form

Child's Room # : _____

Child's Grade: _____

Child's Name: _____

Send home with child: Yes _____ No _____

If No, keep in the office for pick up _____

If Yes, sign the disclaimer below

I will not hold Decatur Classical School or PTA responsible for

the lost or misplaced certificate / gift cards.

parent signature

print name

Check # _____

Phone # _____

You may down load or view Vendor List or Order form at:

www.decaturchlassical.org



Order form due back:

Certificates distributed:

You may also pick up your gift card order at the PTA or LSC meeting!

PTA Meeting: Thurs, _____ at 6:30pm

LSC Meeting: Immediately following PTA Meeting

Please make checks payable to: Decatur PTA

Questions? Call: Julie Calcaño 773-425-4640

