

Christmas Scrip Order Form

Last day to place special orders: Friday, December 1, 2023

- Please check your order for accuracy. Inaccurate or incorrect orders will be returned unprocessed.
- Cash or checks must be for the exact amount of purchase. Checks must be payable to St. Mary Catholic School.
- Drop off and pick your order at the school office.
- Please allow up to 10 working days for order processing. There are no exceptions.

If you have any questions, please contact the school office at 970-353-8100 or email admin.assistant@stmarycs.net.



Retailer	Increment	Quantity	Cost
Amazon	\$25/\$50/\$100		
Bath & Body Works	\$25		
Cabela's	\$25/\$50/\$100		
Chipotle	\$25		
Home Depot	\$25/\$50/\$100		
Human Bean	\$10		
Kohls	\$25/\$50/\$100		
Lands' End	\$25/\$50/\$100		
LL Bean	\$25/\$50/\$100		
Macy's	\$25/\$50/\$100		
Marshalls/TJ Maxx/Home Goods/Sierra	\$25/\$50/\$100		
Nike	\$25		
Old Navy	\$25/\$50/\$100		
Olive Garden	\$25/\$50		
Qdoba	\$25/\$50		
Red Robin	\$25		
Scheels	\$25/\$50/\$100		
Sprouts	\$25/\$50/\$100		
Texas Roadhouse	\$25/\$50/\$100		
Ulta	\$25		
Under Armour	\$25		
Visa	\$25/\$50/\$100		
Walmart	\$25/\$50/\$100		

Please provide the following information:

Name: _____

Phone Number: _____

E-Mail Address: _____

Name of Oldest Student: _____

Total Amount: _____

Number of Cards: _____

Amount Paid: _____

School Family Credit: _____

Teacher/Grade: _____

Formulario de pedido de vales de Navidad

Último día para realizar pedidos especiales: viernes 1 de diciembre de 2023

- Por favor revise su pedido para ver si es exacto. Los pedidos inexactos o incorrectos se devolverán sin procesar.
- Efectivo o cheques deben ser por el monto exacto de la compra. Los cheques deben ser pagaderos a St. Mary Catholic School.
- Deje y recoja su pedido en la oficina de la escuela.
- Espere hasta 10 días hábiles para el procesamiento del pedido.
No hay excepciones.

Si tiene alguna pregunta, comuníquese con la oficina de la escuela al 970-353-8100 o envíe un correo electrónico a admin.assistant@stmarycs.net.



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Por favor provea la siguiente información:

Nombre: _____

Numero de telefono: _____

Correo electrónico: _____

Nombre del estudiante mayor: _____

Monto Total: _____

Cantidad de Tarjetas: _____

Cantidad pagada: _____

Crédito de familia de escuela: _____

Maestro/Grado: _____