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|--|-----------------------------|----------------------|
| Parent/Guardian Name | Parent/Guardian e-mail | Phone |
| Student Name | Teacher & Grade | |
| Box Top Dress Down: _____ # of months (7 max) | (\$1.00 per month) | = \$ _____ |
| | Popcorn \$0.50 a bag | |
| Popcorn Friday: _____ # of bags (2 max) each time | _____ # of months (7 max) | = \$ _____ |
| Cash/Check/Card | Check # _____ | Grand Total \$ _____ |

Make Checks Payable to HOPE

If you have more than 1 student in your family please fill out a form for each student. You may submit 1 check and staple family order forms together and submit to 1 classroom.

Thanks for your support of HOPE fundraising. Your contribution provides supplemental educational opportunities to all Hawthorn Academy Students.

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