Rosary Primary TEA TOWEL FUNDRAISER

Dear Parent / Carer,

We are selling tea towels as a major school fundraiser. The limited edition tea towel design will be made up of portraits drawn by all of our children and staff. The pictures and names will be arranged in year groups and then screen printed onto premium quality white cotton tea towels (50x70cm).

Tea towels are an excellent gift and keepsake idea. The children love to see their own artwork in print; they make a lasting memento to remember classmates, are amazing as gifts for parents, relatives and special friends or just use them to dry the dishes!

There is a sample tea towel hanging in the window of the front office for viewing if you wish.

It is only $15 for one limited edition tea towel OR SAVE by ordering 3 for $40 and $13 each from 4 onwards (e.g 5 tea towels equal a total cost of $66).
Don’t forget to order a few extras for family members and your keepsake box. Tea towels can be ordered by completing the form below and returning to your child’s class teacher clearly marked “TEA TOWEL ORDER”.

Final orders are due by →   Wednesday 2nd November 2016

Any questions please contact Kath Watson (Year 5 teacher).

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TEA TOWEL ORDER FORM

Eldest Child Name: .................................................................................. Class: ______________

Contact Name and Phone Number: ____________________________________________

Number of Tea Towels Ordered:  1  2  3  4  5 or more → __________

Please complete payment option:                                               TOTAL $_________
  □ Cash (please enclose with order)
  □ BPAY (using your school fee BSB and Acc)
  □ Credit Card (please complete below)

Name(s) ............................................................................................................ Class(es) ______________

Payment for .............................................................................................................................................

AMOUNT $ __________
  □ CASH
  □ CHEQUE
  □ AUTHORISE USE OF MY DIRECT DEBIT OPTION

PLEASE DEBIT MY MASTERCARD □  VISA CARD □  EXPIRY DATE: .........../...........

CARDHOLDER'S NAME................................................................................ SIGNATURE..............................................