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EVENT: Matthews Elementary/SCHOOLHOUSE ROCK—March 24, 2015

PARENT'S NAME _____

STUDENT'S NAME _____ **TEACHER:** _____

MAILING ADDRESS _____

PHONE _____ **E-MAIL:** _____

PLEASE SEND _____ DVD(s) (*\$20.00/EA.) AND _____ PHOTO CD (\$5.00/EA.)

***ANY ORDERS RECEIVED AFTER APRIL 15, 2015, WILL REQUIRE AN ADDITIONAL \$5.00 FOR SHIPPING DIRECTLY TO THE PARENTS' HOME.**

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VISA-M/C CARD NUMBER _____ EXP. DATE _____

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