



Fundraising Gift Card Program

NAME OF ORGANIZATION & MAILING ADDRESS: _____

CONTACT PERSON: _____

CONTACT PERSONS' TELEPHONE NUMBER: _____

DATE FORM SUBMITTED: _____

TOTAL AMOUNT OF GIFT CARDS : \$ _____

Schools, Churches, and any Not for Profit group can qualify for a 5% discount on Gift Cards.

Minimum orders of \$500.00

Allow up to 24 hours for completion of order

\$5 = _____ \$25 = _____ \$100 = _____
\$10 = _____ \$50 = _____