PARKLAND HIGH SCHOOL STUDENT STORE ORDER FORM

SOLD TO

Date: _____

Name: _____

Address: _____

City, State, Zip: _____

Email: _____

Phone: _____

Qty	Size	Item#/Color	Price	Total
			SUBTOTAL:	
			TOTAL DUE:	

Check or Money Order ONLY

Mail order form and payment to:

Parkland High School

2700 North Cedar Crest Blvd

Allentown, PA 18104

Attn: PHS Student Store

Internal Use Only:

Date Received: _____

Date Picked Up: _____