



**2018-2019
Resurrection Elementary**

Please *PRINT* and return this form with a check payable to

Holy Family Catholic Schools

on or before July 26th

We do need a separate check per school site

| | | | |
|---------------------------------|--|-------------------------------------------------|--|
| Parent/Guardian Name(s): | | Holy Family ID or Family Code (if known) | |
|---------------------------------|--|-------------------------------------------------|--|

| Item | Cost | Instruction | Amount/ Select/ Quantity | Total |
|--------------------------------------------------------------|-------------|--------------------------------|---------------------------------|--------------|
| Parent Association Dues | \$20 | <i>Check box to select</i> | <input type="checkbox"/> | |
| Memory Book | \$9.00 | <i>Enter quantity</i> | | |
| Data Notebook (Gr K & New Students) | \$5 | <i>Enter quantity</i> | | |
| Sacramental Fee (Gr 2 Resurrection Parishioners only) | \$35 | <i>Check box if applicable</i> | <input type="checkbox"/> | |
| Assignment Notebook (Gr 3-5) | \$4.50 | <i>Enter quantity</i> | | |
| Holy Family Logo Bank Bag (Gr 3-5) | \$4 | <i>Enter quantity</i> | | |
| Recorder (Gr 3 only) | \$3 | <i>Enter quantity</i> | | |
| Bible (Gr 4-5) | \$10 | <i>Enter quantity</i> | | |

18-19 Meal Costs : Lunch \$2.75, Breakfast \$1.75, Milk Break \$.60)

Student First & Last Name _____ Amount \$ _____

Student First & Last Name _____ Amount \$ _____

Student First & Last Name _____ Amount \$ _____

Student First & Last Name _____ Amount \$ _____

Meal Total

Check Number

Resurrection Family Total