

Hope Highlands PTO Gift Card Program

ORDER FORM

Phone

#:

Email:

Name:

Please return the completed form with payment in full to:

HH PTO
Attn: Gift card Program

NOTE: Cash, Check or Money Orders are acceptable

Please make checks payable to:
Hope Highlands PTO

Store	Card Denominations			Qty	\$ Amount
Dave's Market Place	___ # of cards @ \$25	___ # of cards @ \$50	___ # of cards @ \$100		
Shaw's	___ # of cards @ \$25	___ # of cards @ \$50	___ # of cards @ \$100		
Stop & Shop	___ # of cards @ \$25	___ # of cards @ \$50	___ # of cards @ \$100		
Aeropostale	___ # of cards @ \$25				
Applebee's	___ # of cards @ \$25	___ # of cards @ \$50			
Barnes & Noble	___ # of cards @ \$25	___ # of cards @ \$50			
Bass Pro Shop	___ # of cards @ \$25	___ # of cards @ \$50			
Bath & Body Works	___ # of cards @ \$25	___ # of cards @ \$50			
Bed Bath & Beyond	___ # of cards @ \$25	___ # of cards @ \$50			
Bennigan's	___ # of cards @ \$25	___ # of cards @ \$50			
Best Buy	___ # of cards @ \$25	___ # of cards @ \$50			
Blockbuster	___ # of cards @ \$10	___ # of cards @ \$20			
Cheesecake Factory	___ # of cards @ \$25	___ # of cards @ \$50			
Cracker Barrel		___ # of cards @ \$50			
Foot Locker	___ # of cards @ \$25	___ # of cards @ \$50			
Gap	___ # of cards @ \$25	___ # of cards @ \$50			
Home Depot	___ # of cards @ \$25	___ # of cards @ \$50	___ # of cards @ \$100		
I-Tune	___ # of cards @ \$15				
Jet Blue		___ # of cards @ \$50	___ # of cards @ \$100		
Joann Fabrics	___ # of cards @ \$25	___ # of cards @ \$50			
Kohl's	___ # of cards @ \$25	___ # of cards @ \$50			
Land's End	___ # of cards @ \$25	___ # of cards @ \$50			
Macaroni Grill	___ # of cards @ \$25	___ # of cards @ \$50			
Marriott		___ # of cards @ \$50	___ # of cards @ \$100		
Nordstrom		___ # of cards @ \$50	___ # of cards @ \$100		
Old Navy	___ # of cards @ \$25				
Olive Garden	___ # of cards @ \$25				
On The Border	___ # of cards @ \$25				
Outback		___ # of cards @ \$50			
Pizza Hut	___ # of cards @ \$25	___ # of cards @ \$50			
Pottery Barn	___ # of cards @ \$25				
Sears	___ # of cards @ \$25	___ # of cards @ \$50			
Staples	___ # of cards @ \$25				
Southwest Air	___ # of cards @ \$25				
Starbucks	___ # of cards @ \$15				
Ticketmaster	___ # of cards @ \$25	___ # of cards @ \$50			
Toys R Us	___ # of cards @ \$25	___ # of cards @ \$50			
Travelocity			___ # of cards @ \$100		
Total of Gift Cards Ordered					
Total Amount Due					\$

Please indicate your choice of pick-up by checking one of the following:

I will pick up my cards in the front office.

Please send home with my child (name) _____ Teacher and room # _____

Signed _____ Date _____

_____ I waive any responsibility of loss or damage. (Must be checked or cards will not be released to the student)