For Small Hands School Credit Promotion

Group Order Cover Sheet

Please note: If you'd rather not fill out this Cover Sheet, you can create your Group Order online and let the website calculate totals for you. Then print out the Group Order and send it by mail, email, or fax with your payment. View the how-to details at forsmallhands.com/2-ways-to-participate.

Please Credit:

School Customer #: ______________________

School Name: ______________________

Mailing Address: ______________________
Street

____
City State Zip

☎ ( ) ______________________

Coordinator/Contact Name: ______________________

☎ ( ) ______________________

Email: ______________________

Final Steps Before Submitting Your Order

❑ Collect completed Family Group Order Forms and payments from families. Make sure family checks are made payable to the designated party (**not to Montessori Services**).

❑ Check the math on each order to be sure the family has submitted the right amount.

❑ Fill out this Group Order Cover Sheet completely. ('Please Credit' box, Coordinator information, 'Ship To' box, payment information, family order totals, number of bags, school closure dates.)

❑ Add up the Family Order Total column. This is the Group Order Amount Due. Your ONE payment should match this amount.

❑ Include payment. **One payment** per Group Order.

• Paying by check? Make the check payable to Montessori Services.

• Paying by credit card? Fill out credit card information completely.

❑ **MasterCard** ❑ **Visa** ❑ **American Express** ❑ **Discover Card**

Card #: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Expiration Date ☐☐☐☐ **3 or 4 digit CVV code** ☐☐☐☐

Name on Card: ______________________

☎ ( ) ______________________

❑ Make a photocopy of this Cover Sheet for your records.

❑ Make sure you keep two copies of each Family Group Order Form — one for each family when you distribute the orders and one for your records.

❑ Mail, email, or fax all the Family Group Order Forms AND this Group Order Cover Sheet to Montessori Services (see below).

Montessori Services

11 West 9th Street, Santa Rosa, CA 95401

Fax: 800-483-9822

email: info@MontessoriServices.com

Questions?

877-975-3003 • M-F, 8:00am - 4:30pm PT

Rec'd For office use:

#: ______________________

Total # pages sent, including this cover sheet: ______________________

Ship To: (We must have a street address, not P.O. Box, for delivery.)

Name: ______________________

Attention: ______________________

Address: ______________________
Street

____
City

____
State Zip

Family Order Totals *Attach additional sheet if necessary.*

Name of Family	Family Order Total
Group Order Amount Due *Please send **one payment** equal to this amount.*	

How many free bags do you need? ______________________

(Usually 1 per family is enough. Enter 0 if you don't want any bags.)

When does your school close in December? ______________________