

# CCL Car Magnet Order Form

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Day: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Telephone #: \_\_\_\_\_

**Thank you for participating in this CCL fundraiser and representing the CCL by proudly displaying our CCL magnet!**



QTY

TOTAL # Magnets	
X \$5.00 each	
Total Amount	

***Accepting CASH or CHECKS  
made payable to RGP (Rockwood  
Gifted Program)***

Please allow a few weeks for processing.  
Once payment is received, magnets will be sent home with your child.

# PTO

**CENTER FOR  
CREATIVE LEARNING**