Memory Book Order Form

Patapsco Middle School, 2017-2018

Student Name: _____

Student Grade: _____ Homeroom Teacher: _____

Number of Yearbooks: _____

x cost of each book: __$23__

Total Paid: _____

Method of Payment: CASH CHECK (Check #_____)
(circle one) Payable to **Patapsco Middle School**

Name on check:

_____

Parent/Guardian Contact *(if I have questions about the order)*

Name: _____

Complete only preferred method of contact:

Email: _____ Phone: _____

Memory books will not be distributed until the last week of school.
In order to GUARANTEE a memory book:

- *order online at jostensyearbooks.com OR*
- *submit this form by April 30, 2018*

If you have any questions about this form, please email or call:
Kalina Salsman
kalina_salsman@hcpss.org
410-313-2848