## **Memory Book Order Form**

Patapsco Middle School, 2016-2017

Student Name:		<u> </u>
Student Grade:	Hom	neroom Teacher:
Number of Yearbooks	Of Payment: CASH CHECK (Check #) Payable to Patapsco Middle School Name on check:  Guardian Contact (if I have questions about the order)  e only preferred method of contact:	
x cost of each book:	\$23	
Total Paid:		
Method of Payment:	CASH	
		Name on check:
Parent/Guardian Cont	act (if I have question	ions about the order)
Name:		
Complete only preferre	ed method of contac	ict:
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 May 1, 2017

If you have any questions about this form, please email or call: Kalina Salsman

kalina\_salsman@hcpss.org

410-313-2848