

Pizza Friday

No. of weeks ordering: _____ Date Order Was Placed: _____

<input type="checkbox"/> Cheese
<input type="checkbox"/> Pepperoni

<input type="checkbox"/> Lemonade
<input type="checkbox"/> Apple Juice

<input type="checkbox"/> Pudding
<input type="checkbox"/> No Pudding

<input type="checkbox"/> Small	\$2
<input type="checkbox"/> Medium	\$3
<input type="checkbox"/> Large	\$5

Name of child: _____