

Parent Association

\$25 Punch Card Order Form to be used for Tuesday Lunch Program.

Complete form and mail along with payment to:

LVPA
% Parent Association
675 E. Broad Street
Bethlehem, PA 18018

STUDENT NAME: _____

PARENT NAME: _____

Parent EMAIL: _____

Parent PHONE: _____

I would like to order (1) \$25 Punch Card for my child _____

I would like to order (2) \$25 Punch Cards for my child _____

TOTAL DUE: _____

PAYMENT METHOD:

Check made payable to LVPA enclosed _____

Please charge my credit card: VISA _____ MASTERCARD _____

Card #: _____ Exp: _____

Once punch card is issued to student, LVPA is not responsible if the student loses his/her card, and will not issue a replacement card. If a card is lost and turned into the front office, there will be a number that will correspond to the student's name, in this case the card will be returned to student.

Parent
Signature: _____