## BIRTHDAY TREAT ORDER FORM

Student Name $\qquad$

Student Grade $\qquad$ Date of Birthday Celebration in school $\qquad$ （ALL PARTIES ARE HELD ON FRIDAYS＇ONLY on a first come first serve basis．）

Please indicate what flavor icing you would like to order and the quantity：
$\qquad$ Chocolate Frosting


Total Number of Cookies $\qquad$
$\qquad$
$\qquad$

## PLEASE MAKE CHECKS OUT TO J CAFE

All orders must be placed at least A WEEK in advance and must be accompanied by payment in full．No other birthday treats are allowed．
Parents must provide all paper goods for the class if needed（napkins，plates， cups．）

Bakery items are from J．Cafe

