

Ice Cream Day Order Form

Please return orders by Thursday 9 November



<p>Name: _____</p> <p>Room: _____</p> <p>Please tick</p> <ul style="list-style-type: none"><input type="checkbox"/> Goody goody gum drop<input type="checkbox"/> Chocolate<input type="checkbox"/> Salted caramel <p>Price \$2.50</p> <p>Free sprinkles and wafers</p> <p>Please note and dietary needs</p>	<p>Name: _____</p> <p>Room: _____</p> <p>Please tick</p> <ul style="list-style-type: none"><input type="checkbox"/> Goody goody gum drop<input type="checkbox"/> Chocolate<input type="checkbox"/> Salted caramel <p>Price \$2.50</p> <p>Free sprinkles and wafers</p> <p>Please note any dietary needs</p>
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