

ORDER FORM

Number of sets _____ @ \$10.00 each

Subtotal \$ _____

Shipping & Handling \$ _____ @ \$2.50/set

TOTAL \$ _____

Mail your order form to:

Jewish Family and Children's Service of Minneapolis
13100 Wayzata Blvd. Suite 400, Minnetonka, MN 55305
Attn: Story Cards

Make checks payable to:

Jewish Family and Children's Service

Or charge your purchase: VISA MasterCard

Card #: _____ - _____ - _____

Expiration Date: _____

Signature _____

For information: www.norcmn.org or phone 952-542-4819

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____

E-mail _____