



TEXAS CHRISTIAN SCHOOL / HIGH SCHOOL

Office: (281)550-6060 FAX: (281)550-2400
office@TexasChristianSchool.org

(MUST BE RETURNED BY Monday, 10/7/24, 8:30 am)

PIZZA ORDER FORM / 4 Weeks / October 9 – 30, 2024

STUDENT NAME _____ **Grade** _____ **Teacher** _____

{one child per form}

WEDNESDAY – PAPA JOHN’S PIZZA **Please mark “number” of slices to be ordered.** (Slices are \$1.50 each)

	<u>10/9</u>	<u>10/16</u>	<u>10/23</u>	<u>10/30</u>		
Cheese	___	___	___	___	x	\$1.50 per slice
Pepperoni	___	___	___	___	x	\$1.50 per slice
Beef	___	___	___	___	x	\$1.50 per slice
						Total \$ _____

1. Money for orders must be the **exact amount, no change will be given.** We can add extra to snack shop card.
2. Cash or check must be attached to the Order Form or Form will not be processed.
3. When sending one check for siblings please staple all orders and the check together and have one child turn in all orders.
4. Please note that there are no refunds for days student is absent.



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