

vacation	Rible	School	Order	Form	(US\$)
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Organization Name: _____ Organization ID Number: _____

		Date:	·			
Ship Material to:			Bill to: (☐ same as ship to)			
		Name:				
Address:						
		City: State/Province: Zip/Postal Code:				
e:						
le:						
		_ Country:	Country:			
Fax:		E-Mail:	E-Mail:			
☐ Regular	Mail (3 - 4 Weeks) Air Ma	I (5 -10 Days) □ Express	s Mail (3 - 5 Days)			
	,		, , ,			
Specify) _		Account number	to be billed			
Item #		iption	US\$ Price	Total		
500	VBS Leader Packet					
502	Youth Teacher Packet					
503						
504	-	acket				
505	Beginner Teacher Packet		\$ 5.50			
506	VBS Certificates (25 per pac	k)	\$ 7.00			
507	Joint Worship Guide (copy in	Leaders Packet)	\$ 2.75			
	Joint Worship Guide (copy in Joint Worship CD	Leaders Packet)	\$ 2.75 \$ 5.00			
507		n Leaders Packet)	·			
507	Joint Worship CD	Leaders Packet)	·			
507 509	Joint Worship CD May be ordered for pupils		\$ 5.00			
507 509 510	Joint Worship CD May be ordered for pupils Youth Activity Leaflets	ets	\$ 5.00 \$ 1.75			
	Expecify)	Fax: Fax: Fax: Air Mail (3 - 4 Weeks)	Address: City: State/Province: _ de: State/Province: _ Country: Fax: E-Mail: Regular Mail (3 - 4 Weeks)	Address: City: State/Province: State/Province: City: State/Province: State/Province: Country: Country: E-Mail: E-Mail: E-Mail: E-Mail: State/Province: Country: E-Mail: E-Mail:		