



Strawberry Fundraiser Order Form



Student Name: _____
Organization: _____
Organization Address: _____

Price Per:
 Half Flat: \$ 13.00
 Full Flat: \$ 22.00

Salem Band

Note: Each half flat is equal to roughly one gallon

Customer Name	Phone Number	Address	Half Flat	Full Flat	Total	Paid
Example: Jane Doe	276-555-0000	555 Strawberry Lane, Doe, VA	5	5	\$ -	✓
Page 1 Totals:						

Customer Name	Phone Number	Address	Half Flat	Full Flat	Total	Paid
Page 2 Totals:						
Totals; Page 1 & 2:						