

# Birthday Ice Cream Order Form

Please fill out the information below and email to Susie Simmons at [ssimmons@bcbe.org](mailto:ssimmons@bcbe.org), or print and send to the school with your child. Send the order form and payment of \$20 (check made out to FWE, or cash) 1-2 weeks before your child's birthday. Last minute requests may be filled if inventory is available.

***NOTE: if your child's birthday is in the month of May, orders and payment must be received by May 5th to ensure we have the inventory to fill the request.***

Child's Name: \_\_\_\_\_

Celebration Date: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Teacher Name: \_\_\_\_\_

***Please choose one flavor only.***

- Birthday Cake Flavored Cone
- Cookie Crumble Cone