

**ST. MARTIN'S BACK TO SCHOOL NEWSLETTER RETURN FORM**

**INSTRUCTIONS** • Write amounts payable on blank lines (\$\_\_\_\_). Total these lines from all sections and write one check payable to St. Martin's Episcopal School. Please return this form and your check to St. Martin's Advancement Office (225 Green Acres Rd., Metairie, La 70003). The school does not bill for these items.

PARENTS' NAMES \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
TELEPHONE: \_\_\_\_\_ E-MAIL \_\_\_\_\_  
STUDENT (1) \_\_\_\_\_ GRADE \_\_\_\_\_  
STUDENT (2) \_\_\_\_\_ GRADE \_\_\_\_\_  
STUDENT (3) \_\_\_\_\_ GRADE \_\_\_\_\_  
STUDENT (4) \_\_\_\_\_ GRADE \_\_\_\_\_

**VOLUNTEER CONNECTION 2010-11 (SEE NEWSLETTER, PAGE 3)**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Admission office aide   | <input type="checkbox"/> Lower School Library aide  | <input type="checkbox"/> Speech/Drama/Fine Arts |
| <input type="checkbox"/> Athletic Department     | <input type="checkbox"/> Lower School Book Fair     | <input type="checkbox"/> Yearbook Photography   |
| <input type="checkbox"/> Bookstore assistant     | <input type="checkbox"/> Martin Family Library aide |   |
| <input type="checkbox"/> Chapel linens/vestments | <input type="checkbox"/> Nurse's Office             |   |

**MOTHERS' CLUB EVENTS/COMMITTEES (SEE NEWSLETTER, PAGE 4)**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Hospitality          | <input type="checkbox"/> Christmas Greens  | <input type="checkbox"/> Spring Fundraiser   |
| <input type="checkbox"/> Birthday Book Club   | <input type="checkbox"/> Family Fest       | <input type="checkbox"/> Santa Secret Shoppe |
| <input type="checkbox"/> Teacher Appreciation | <input type="checkbox"/> New Mothers' Tea  |  |
| <input type="checkbox"/> Room Mothers         | <input type="checkbox"/> Tennis Tournament |  |

**BIRTHDAY BOOK CLUB • MINIMUM \$ 15 DONATION FOR EACH ORDER (SEE NEWSLETTER, PAGE 4)**

DONOR NAME(S) \_\_\_\_\_  
STUDENT'S NAME \_\_\_\_\_ STUDENT ADDRESS \_\_\_\_\_  
BIRTHDATE \_\_\_\_\_ GRADE \_\_\_\_\_ BOOK IS FOR HIS/HER \_\_\_\_ TH BIRTHDAY

DONOR NAME(S) \_\_\_\_\_  
STUDENT'S NAME \_\_\_\_\_ STUDENT ADDRESS \_\_\_\_\_  
BIRTHDATE \_\_\_\_\_ GRADE \_\_\_\_\_ BOOK IS FOR HIS/HER \_\_\_\_ TH BIRTHDAY

DONOR NAME(S) \_\_\_\_\_  
STUDENT'S NAME \_\_\_\_\_ STUDENT ADDRESS \_\_\_\_\_  
BIRTHDATE \_\_\_\_\_ GRADE \_\_\_\_\_ BOOK IS FOR HIS/HER \_\_\_\_ TH BIRTHDAY

DONOR NAME(S) \_\_\_\_\_  
STUDENT'S NAME \_\_\_\_\_ STUDENT ADDRESS \_\_\_\_\_  
BIRTHDATE \_\_\_\_\_ GRADE \_\_\_\_\_ BOOK IS FOR HIS/HER \_\_\_\_ TH BIRTHDAY

SUBTOTAL \$ \_\_\_\_\_

TOTAL \$ \_\_\_\_\_