



Oakbrook Fundraising

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Irwin PA 15642

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www.oakbrookfundraising.com

www.snowballexpress.net

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SNOWBALL EXPRESS PROGRAM ORDER AGREEMENT

BILL TO:

Organization: _____

Attention: _____

Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

County: _____

SHIP TO: Check if Bill To is the same a Ship To

Organization: _____

Attention: _____

Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

County: _____

PROGRAM SPECIFICATIONS

Take Home Bags Letters Envelopes Posters

Tablecloths Date Requested By: _____

Gift Bags

Cash Register

Oakbrook Fundraising is Sole Supplier

Price Markup:

No Markup 10% 20% 30%

Sponsor Name: _____

Phone: _____

Email: _____

President's Name: _____

Phone: _____

Email: _____

Treasurer's Name: _____

Phone: _____

Email: _____

Date(s) to Run _____ to _____

Check all that apply:

Having a family night Shop is during school hours

Weekend Sale Shop is being held outside of school

Requested Delivery Week: _____

of Students in School _____ Grade Levels _____

Last Year's Sales Figure \$ _____

This Year Amount to Pack \$ _____

Repeat: Yes No

Notes

1. Group is not permitted to mark, price or sticker product. No credit will be given for returned product that has been marked, priced, or stickered.
2. Payment in full is due upon receipt of invoice.
3. Any cancellations after October 15th may incur a cancellation fee.

TERMS

4. Any promotions, special offers, or discounts will not apply if Oakbrook Fundraising is not the sole supplier of your holiday gift shop.
5. Sales tax, if applicable, is the responsibility of the selling group.
6. By signing below, I hereby certify that the above organization has given me the authority to conduct this sale. I agree to the terms of the agreement and will be responsible for payment in full.

Sponsor's Signature _____

Date: _____

Distributor's Signature _____