



Falcon Box Order Form

Name _____
Phone _____ (you will be phoned/emailed when the order is ready for pickup)
Email _____

Item: _____ Size: _____ Color: _____ Qty: _____ Price: _____
Item: _____ Size: _____ Color: _____ Qty: _____ Price: _____
Item: _____ Size: _____ Color: _____ Qty: _____ Price: _____
Item: _____ Size: _____ Color: _____ Qty: _____ Price: _____
Item: _____ Size: _____ Color: _____ Qty: _____ Price: _____
Item: _____ Size: _____ Color: _____ Qty: _____ Price: _____
Item: _____ Size: _____ Color: _____ Qty: _____ Price: _____

Total: _____ Check: _____ Cash: _____

Your order must be accompanied by a check or cash.
Please return the form with payment to any building secretary or mail to:
OABCIG High School
Attn: Donna Rasmussen
900 Montgomery Drive
Ida Grove, IA 51445
If you have any questions or want to order online email: bmiller@oabcig.org OR
<mailto:drasmussen@oabcig.org>