

PORTSMOUTH ABBEY SCHOOL
Birthday & Special Occasion Cake Order Form

Please mail your orders to Maria Arruda at: 285 Corys Lane, Portsmouth, RI 02871

Student's Name: _____ House: _____

House Parent Name: _____

Date & Time of Pickup: _____ (7-day advance notice required)

Your Name and telephone number: _____

Please check (☑) all items you would like to order

BIRTHDAY CAKE - \$20.00 per ½ Sheet Cake

- ½ Sheet Cake (double layer) – Serves 40 – 45 people - **YELLOW**
- ½ Sheet Cake (double layer) – Serves 40 – 45 people - **CHOCOLATE**
- ½ Sheet Cake (double layer) – Serves 40 – 45 people - **MARBLE**

ICING (price included in cake price above)

- CHOCOLATE** frosting
- WHITE BUTTER** frosting

INSCRIPTION

Please write/type what you would like to say on the cake (example: "Happy Birthday John")

ICE CREAM - \$23.00 per 3-gallon tub (each 3-gallon tub serves 40-45 people)

- 3-gallon tub - **CHOCOLATE**
- 3-gallon tub - **VANILLA**
- 3-gallon tub - **STRAWBERRY**

SODA - \$5.00 per six-pack of 12 oz cans

- Coke – number of 6-packs: _____
- Sprite – number of 6-packs: _____
- Orange – number of 6-packs: _____
- Root Beer – number of 6-packs: _____
- Ginger Ale – number of 6-packs: _____
- Dr. Pepper – number of 6-packs: _____

Total order amount: \$ _____ .00

All paper products (forks, spoons, napkins, plates, bowls, etc) are included in the price. The Bookstore will direct this order form to the Dining Hall when it is received and notify the Houseparent to contact the Dining Hall to coordinate the order pick-up.

Payment method (please check one)

- Check - amount enclosed: \$ _____ .00
- Charge my child's account: \$ _____ .00
- Credit Card – amount to charge: \$ _____ .00 Signature: _____

Credit card number: _____ Expiration Date: _____

Name as it appears on the credit card: _____