

**The Haddon Fortnightly
Gift Card Order Form**

Name _____

Phone Number _____

Please deliver my gift certificates to the monthly business meeting indicated below:

_____ General Club _____ EMD

Merchant	Gift Card Denomination	# of Certificates Ordered	Total Amount Due
Total Check Amount			\$

Checks should be made payable to:
The Haddon Fortnightly Scrip Program

Scrip percentages are subject to change. To view the current rate of a particular gift card as well as other gift cards that are available, go to www.shopwithscrip.com

To place an order, please contact:
Diane Alcavage 856 261-4449 dladancer@aol.com
116 Bergen Ave Bellmawr, NJ 08031