

# SEACLIFF BOOK CLUB ORDER FORM

Student Name: \_\_\_\_\_ Teacher: \_\_\_\_\_

Book #	Title	Donated By	Price	Handling Charge	Total
				\$1.50	
				\$1.50	
				\$1.50	
				\$1.50	
				\$1.50	
				\$1.50	
				\$1.50	
				\$1.50	
				\$1.50	

**Important:** Please provide one or two alternate book choices to use if substitution is needed. If no alternate is provided, your school librarian will select a suitable substitute.

				\$1.50	
				\$1.50	
				\$1.50	

**Donation Option:**

PLEASE CHOOSE ANY BOOK YOU FEEL  
IS APPROPRIATE WITH MY ENCLOSED  
DONATION OF \$ \_\_\_\_\_

Subtotal	
Sales Tax 7.75%	
Total	