

## Expressive Education Mail-In Order Form

*To order a book, please fill out and return the following form along with your payment:*

**Book Year:** \_\_\_\_\_

**Child's Name\*:** \_\_\_\_\_

**School Name:** \_\_\_\_\_

**State in Which School is Located:** \_\_\_\_\_

**Number of Books:** \_\_\_\_\_

**Amount enclosed:** \_\_\_\_\_

**Type of Payment (please circle):**    Check            Cash            Money Order

*(Make checks and money orders out to Expressive Education)*

### **Name and Address to Send Book(s):**

Name: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### **Send completed form and payment to:**

Expressive Education

P.O. Box 189

Horseshoe Bend, ID 83629

*\*If you are a teacher, please include your name here instead.*