

HOLIDAYLAND KID'S SHOPPE CONTRACT

SCHOOL: _____ Telephone: () _____

School Address: _____

City: _____ State: _____ Zip: _____

Representative: _____ Telephone: () _____

Address: _____ Email: _____

City: _____ State: _____ Zip: _____

Number of Students: _____ Previous Year's Sales (if known): _____

Starting Date: _____ Delivery Date: _____

Ending Date: _____ Pick-Up Date: _____

Please Note: Dates for your sale can be given later and are not needed to sign-up.

Coupon Amount: \$ _____ Cash Register: YES NO

% Profit _____ (10% for current merchandise or 20% for last year's merchandise)

Special Offers Given: _____

Special Instructions:

- Superb Fundraising's Holidayland Kid's Shoppe is a no inventory program where it is the school's responsibility to keep track of the sales and pay based on that amount.
- We offer free re-orders of merchandise delivered to the school the next day, if a re-order is called or faxed in by 1:00 PM.
- Starting inventory is 1 1/2 times the merchandise you sold the previous year or \$15 per student, if that number is not available.
- Superb Fundraising supplies tablecloths, plastic carry home bags, parent letters, To / From bags, and money envelopes free of charge.
- Superb Fundraising reserves the right to limit quantities and to exchange items where items are unavailable to obtain proper quantity in each category.

Name of School Representative
Completing this Contract: _____ Date Completed: _____

Telephone of School Representative Completing this Contract: () _____

If known, Name of Superb Representative: _____

By completing and submitting this contract to us via email, you are agreeing that your submittal is the equivalent of your signature and that you agree to the Terms and Conditions set forth in this contract.