



Milk & Cookie Day Materials Request Form

Date: _____

School Name: _____

Contact: _____

School Address: _____

Our plans for Milk & Cookie Day*

Tell us how you are organizing this event, the selling price of your milk & cookie coupon, and if you are combining this with another activity.

Cookie bags required: _____

Cookie & Milk coupons required: _____

Poster blanks (11" X 17") to promote day: _____

Date of your Milk & Cookie Day*: _____

Note: Both items marked with an asterisk* must be completed for your order to be processed.

Fast Fax
Club Moo
(780) 455-2196



E-mail
ksearle@albertmilk.com

