

# RESERVATION FORM

## S.C. Kids Korner Gift Shoppes®



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*Teaching Children  
the Joy of Giving!*



SCHOOL NAME:			GROUP TYPE:			
CHAIRPERSON:			DAYTIME CONTACT PHONE:			
BILLING ADDRESS:			CHAIRPERSON'S HOME PHONE:			
CITY:	STATE:	ZIP CODE:	CHAIRPERSON'S EMAIL:			
SHIPPING ADDRESS (If Different)			SHIPPING CITY & ZIP (If Different)			
SCHOOL OR DELIVERY ADDRESS TELEPHONE NUMBER			NUMBER OF STUDENTS IN YOUR SCHOOL			
PRESIDENT'S NAME:			HOME or CELL PHONE NUMBER:			
TREASURER'S NAME:			HOME or CELL PHONE NUMBER:			
DID YOU RUN A SHOP LAST YEAR? ( ) YES ( ) NO IF YES, WITH WHOM? _____						
AND HOW MUCH DID YOU PURCHASE FROM THEM? \$ _____						
START DATE OF SHOP:		END DATE SHOP:		Circle your mark-up - 0% 10% 20% 30%		

Simple Inventory Program  
Payment Process

At the end of the sale, simply count the number of items in each price code, complete the provided worksheet. The worksheet will help you calculate the amount you will pay. With the program you do not have to count any items in.

Notes: \_\_\_\_\_

### For Office Use Only:

Date agreement received: \_\_\_\_\_

Total # of kits: \_\_\_\_\_ Kit A \_\_\_\_\_ Kit B \_\_\_\_\_ Kit C \_\_\_\_\_ Add on Kit \_\_\_\_\_

Price codes: 1 2 3 4 5 6 7 8 9 10 11 12 13

Qualifies for signing bonus of large inflatable Santa or Snowman \_\_\_\_\_ Other notes: \_\_\_\_\_

### Group's request for Product & Terms:

We, the above named group, understand that Kids Korner® program is designed to run during school hours because it affords all the children in the school an opportunity to shop in a "Safe - Non-Commercial" atmosphere.

Therefore:

1. We understand that we may return all unsold, unmarked merchandise for full credit and you will pay the freight both ways.
2. We understand we must keep the merchandise secure, use the company's accounting system and do our best to prevent shop lifting.
3. We understand we are to run the Gift Shop program for **three or more days during school hours**. \_\_\_\_\_ Intl.
4. We understand the company will provide us with FREE Flyers & Gift Guide Envelopes for the above number of students and a FREE supply kit of Table Cloths and Gift Bags for the merchandise we have ordered. We understand we return ALL unused supplies. \_\_\_\_\_ Intl.
5. We understand that there is no prepayment required and we agree to send payment for product sold within 24 hours of completion of our Gift Shop sale.
6. We further understand that we may not cancel this agreement after October 1, 2011. \_\_\_\_\_ Intl.
7. We understand that if we choose not to run the shop after October 1, 2011 we will pay a \$500 per kit cancellation fee. \_\_\_\_\_ Intl.

DATE:	SALES REPRESENTATIVE:
Authorized Group Signature No. 1	Authorized Group Signature No. 2