North Park Covenant Church 2024-2025 Cake Ministry Order Form

The cost is \$20/cake, and orders must be received at least two weeks prior to delivery date.

Name of Student		NORTH PARI
Hometown		
Campus Residence (re	equired):	
Anderson Hall	☐ Burgh Hall	Ohlson House
☐ Park North	Sawyer Court	
On-Campus Apa	rtment:	
Apartment Addr	ess	
Student's Phone (re	quired)	
Student's Email (red	quired)	
Date for Cake Deliv	ery	Occasion
Cake Type: ☐ layer ☐ 9x13 pa	Flavor: Angel Food	d Frosting: Chocolate White
	☐ Chocolate	□Vanilla
Gluten-free 🗌	☐ Other*	□None
* If other, what kind of	cake mix?	
•		es listed on the form, but are esh fruit or whipped cream.)
Ordered by		
Name		
Address		
Phone		
Email		

Payment		
Paid Online	(date)	Payment Enclosed
-	nade online at <u>www.n</u> · last name and "Cake	pcovenant.org/give. e" in the optional memo line.

Checks can be made out to North Park Covenant Church with "Cake Ministry" in the memo line. Please mail them to: 5250 N. Christiana Avenue, Chicago, IL 60625.

Alternatively, you can scan this form and email it to npcc@npcovenant.org.

Thank you!

You may send a greeting card, in care of the church, to be included with the cake, if you wish, and the baker will make sure it is delivered with your student's cake. Alternatively, you may email a brief note to be transcribed onto a notecard and sent with the cake.

Please do not write a message to your student on this form.

Questions?
Please reach out to Ann-Marie Olson Frisk at npcc@npcovenant.org or 773-463-0055.

Thank you for your order!