

The Alvah Scott PTA Presents



Come Join Us For Movie Night & A Family Dinner!

Friday, 11/20/15 @Alvah Scott's School Cafeteria

Doors Open- 5:30pm ☆ Movie Showtime- 6:00pm

Enjoy a Family Dinner & Movie Screening of Disney's Big Hero 6!

\$5 Per Person (Includes 2 slices of pizza, chips, cookie and popcorn!)

Water cups will be available, but families are welcome to bring their own reusable water bottles/drinks.

Relax & Get Comfy! Bring your blankets, mats, lawn chairs, pillows, sleeping bags, Baymax plush doll, etc. We will have a big open viewing area for everyone to relax at while enjoying the film! PJ's & Big Hero 6 super hero outfits are also welcome! This will be a fun evening for all families to come together, create memorable friendships and enjoy the company of your Alvah Scott `Ohana!

BIG HERO 6 ★ Rated PG ★ Runtime: 108 Minutes

This is an Oscar Award Winning hit movie that was selected by the honorable 4th Graders for collecting the most Box Tops 4 Education labels! Keep collecting labels to help your grade be the next winner!

Order forms should be submitted through the oldest child/student (1 form per family) and may be turned into his/her teacher for placement in the PTA mailbox. During Family Movie Night, please go to the "Pre-Paid Line" to pick up pre-paid dinner tickets. For questions please email: alvahscottpta@gmail.com

CASH/CHECKS & ORDER FORM MUST BE TURNED IN BY TUESDAY, NOVEMBER 17, 2015.

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Oldest/Single Child's Name: _____ LAST FIRST

Oldest Child's Grade: _____ RM#: _____ Teacher: _____

Parent/Guardian's Name: _____

Contact Phone/Email: _____

Total # of MOVIE NIGHT Dinner Meal Orders: _____ x \$5.00 Per Person = \$ _____ Enclosed

We won't be participating, but we'd like to make a monetary donation to Scott School PTA in the amount of \$ _____

Payment and/or Donation Type (Circle): CASH / CHECK

Please make checks payable to Scott School PTA & write student's name & RM# in the Memo section.

We thank you for your support & look forward to seeing you & your `ohana on Movie Night!

PTA Use Only: Receipt#: _____ Date Received: _____ Initials: _____ #of Meals Paid for: _____
Total Cash RCVD: \$ _____ Check AMT: \$ _____ Order Total: \$ _____ Donation RCVD: \$ _____
#of Dinner Tickets to Issue: _____ Order Filled By: _____