

# MCCA 2018 BOUTIQUE ORDER FORM

Item	Colour	Quantity	Price	TOTAL
<b>A FEW OF OUR FAVOURITE THINGS ITEMS</b>				
Notebooks with Stylus Pen	Purple		\$6.00	
	Navy		\$6.00	
	Lime Green		\$6.00	
	Burgundy		\$6.00	
Therm-O-Sack Insulated Lunch Bag (Colour choices are: black, red, navy, lime green, purple, pink, teal) Please indicate which colour			\$6.00	
Emperor Tote	Blue		\$10.00	
Thanks For All You Do (Word Cloud) Double-Wall Acrylic Tumbler w/Straw			\$10.00	
O'Fishally Awesome Lapel Pin			\$5.00	
Lapel Pin presentation box	Black		\$1.00	
Family Child Care Pin			\$5.00	
<b>YEARS OF SERVICE PINS</b>				
5 years			\$7.00	
10 years			\$7.00	
15 years			\$7.00	
20 years			\$7.00	
25 years			\$7.00	
30 years			\$7.00	
35 years			\$7.00	
40 years			\$7.00	
MCCA Lanyard	Turquoise		\$5.00	
	Black		\$5.00	
	Purple		\$5.00	
Blingy Lanyard	Silver		\$8.00	
	Red		\$8.00	
	Fuschia		\$8.00	
	Blue		\$8.00	
	Purple		\$8.00	
Lanyard Necklace	Silver		\$5.00	
MCCA Embossed Leather Portfolio Pad			\$22.00	
One Person Can Make A Difference Shopper Tote			\$8.00	
Ethics Poster - 11 x 17 paper			\$4.00	
Subtotal:				

Item	Colour	Quantity	Price	TOTAL
<b>Week of the ECE items</b>				
16 oz. Tumbler (super power logo)	Blue		\$10.00	
25 oz. Aluminum Sport Bottle (super power logo)				
white with	Orange		\$10.00	
	Red		\$12.00	
	Lime Green		\$12.00	
<input type="checkbox"/> I will pick up my order - no S/H	<b>Subtotal:</b>			
	<b>Subtotal (page 1)</b>			
<i>Please add a \$10 shipping &amp; handling charge, OR</i>	<b>S&amp;H:</b>			
<i>if your order is over \$100 please add 10%.</i>	<b>TOTAL:</b>			
<b>Payment must accompany order form. You may also pay in person.</b>	<b>GRAND TOTAL:</b>			

Name: \_\_\_\_\_

Centre/Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Prov: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Work Phone: (204) \_\_\_\_\_

Fax: (204) \_\_\_\_\_

Email: \_\_\_\_\_

**Manitoba Child Care Association**  
 2nd Floor, Royal Bank Building, 2350 McPhillips Street  
 Winnipeg, MB R2V 4J6  
 Fax: (204) 589-5613  
 (NOTE: Faxed orders must be accompanied with credit card payment).

**Credit Card Information**

Cardholder Name: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiry Date: \_\_\_\_ / \_\_\_\_ CVS \_\_\_\_

Cardholder signature: \_\_\_\_\_