 

**Calling all band class, marching band and color guard members!**

**Sell sour and sweet gummies and earn $30 for your band account for every box sold.**

Each box contains 60 delicious items in two varieties –Gummies and Sour Gummies.

How the sale will be run:

1. **Have this permission slip signed** by your parent ASAP.
2. Gummy boxes will be available for pick-up on Thursday, October 10th, after rehearsal (assuming no delay in delivery). **You must return your signed permission slip to receive your first box of candy.**
3. **Sell** your box as quickly as possible! Be smart – NEVER leave your candy or money unattended, even in the classroom. Protect your box from heat, direct sun or refrigeration.
4. **Return $60 for your box BEFORE SCHOOL from 8am-8:15am ON MONDAYS, Wednesdays and Fridays (starting Wednesday 10/16)** at the band candy closet and sign out another box to sell if you wish! Payment may be made in cash (bills only – no change!) or checks (from parents only) payable to CHS Band Boosters, with “Gummies” in the memo line.
5. **Repeat** steps 3 and 4 as often as you want **before November 15, 2019**! ☺

Questions: Contact Sarah Cavanaugh at sarahc51977@yahoo.com

-----------------------------Return the signed permission slip below in exchange for your first box of gummies ---------------------------------

**Centennial Band Gummies Fundraiser**

Name of Student: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Name of Parent:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

We will participate in the Centennial Band Gummies Fundraiser. Please give the student named above one initial box of 60 items, in exchange for this permission slip. **We will be responsible for payment for all candy that we check out**, including the initial box and any subsequent boxes, whether *sold, unsold, missing, or damaged*. **We will return all money owed by Monday, November 17, 2019**. We also understand that candy is a perishable item, and it must be kept from extreme heat or refrigeration.

Parent Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent’s Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_