

Brighten Your Student's Day

with a care package from home! We are sure you will agree this is the perfect way to send a greeting to your Cottey student during final exams week.

She will appreciate the care package and know you are thinking of her.

You will be pleased she is getting a special, high-quality gift.

And you will save the cost of purchasing and shipping similar items from your home.

We do all the work, and you get all of the credit—what a deal, for only \$20!

While each care package brings surprises, they usually include:

Fruit Nuts Gum
Chips Candy Suckers
Cookies Breakfast Bars
Cheese and Crackers
Full-size Candy Bars, and of course,
Chocolate!

All packages are assembled in a reusable Cottey tote bag. Sorry, due to the volume of orders, special orders cannot be accepted.

Questions? Please contact Shaun West at swest@cottey.edu or by phone at (417) 667-6333, ext. 2126.

COTTEY
Student Life Office
1000 West Austin
Nevada, MO 64772

Finals Week
Care Packages

COTTEY

Finals Week Care Packages

2017-2018



Ordering is Easy

Care packages are \$20 each.

To order, simply complete the order form and the credit card information, or send a check payable to Cottey College, then mail to Cottey College, Care Packages, 1000 W. Austin, Nevada, MO 64772 by

Wednesday, November 29, 2017 or
Wednesday, April 25, 2018.

Credit card orders may be faxed to the Student Life Center at (417) 448-1020.

Care packages will be distributed to the student's residence hall just in time for the final studying hours of the semester!

I have enclosed an additional \$20. Please deliver another care package to an international or other deserving student. Sent anonymously, unless marked here .

Thank you for the support!

All proceeds are used for the Nancy Denman Student Life Scholarship awarded to a returning student. Dr. Denman was coordinator of counseling at Cottey. She lost her fight with breast cancer in January 2005.

Charge \$ _____ (Amount) to: Mastercard VISA Discover

Student's Name: _____

Card Number: _____

Expiration Date: _____ 3-digit Authorization Code: _____

Cardholder's Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

_____ Telephone: _____
(Cardholder's Signature)

Order Form

Student Name _____

Residence Hall and Suite _____

Message: _____