

# five BELOW



**YOU'RE INVITED!**

## TO a FUNDRAISING SHOPPING EVENT FOR

**organization name** Betty Jane CLC PTA

**date** Friday Oct 18th- Thursday Oct 24th 2019 **time** Store Hours

**where** Cuyahoga Falls Location

**it's simple! 10% of the purchases made by members of your group will be donated back to your organization.**

**all we ask is that this flyer is presented to our cashier at the time of purchase.**  
please note that we do not allow flyers to be handed out in our store or shopping center at any time before, during or after your event.

this section to be completed by five below associate

**purchase amount (pre-tax)** \$ \_\_\_\_\_

**register (circle one)**      1                      2                      3                      4                      5                      6

**associate name** \_\_\_\_\_

**SPORTS. TECH. CREATE. PLAY. PARTY. CANDY. ROOM. STYLE. NOW.**

fivebelow.com