

EGG MY YARD

Name of family-_____

Phone number-_____

Address-

Name and age of children (for Easter Bunny Letter)-

Date of delivery (Please circle)

Friday, April 19th or Saturday, April 20st

Number of Eggs-_____

**Payment must be sent or delivered with this form to
The Children's Nest by Friday, March 23rd!**

30 eggs for \$20

Every additional 10 eggs- \$7

***I give permission to The Children's Nest staff to deliver and hide Easter Eggs in my yard on Friday, April 19th or Saturday, April 20th. We plan to deliver after dark!

Signature: _____ Date: _____