



## CAKE & PIE ORDER FORM

Name: \_\_\_\_\_ Phone: (     ) \_\_\_\_\_ - \_\_\_\_\_ Today's date: \_\_\_\_/\_\_\_\_/\_\_\_\_

☐ Ice-cream-only      ☐ Regular Cake      ☐ Egg-less Cake      ☐ Both (Half-&-Half)

Cake Size	# of Servings	Price		
		Ice Cream Only or Combination (ice cream and cake)	Egg-Less Cake (cake only)	Regular Cake (cake only)
<input type="checkbox"/> 6"(SM)	8 - 10	\$17.99	\$17.99	\$14.99
<input type="checkbox"/> 8"(Med)	12 - 16	\$25.99	\$25.99	\$20.99
<input type="checkbox"/> 10"(Large)	16 - 20	\$39.99	\$39.99	\$25.99
<input type="checkbox"/> ¼ Sheet	24 (2" pieces)	\$39.99	\$39.99	\$25.99
<input type="checkbox"/> ½ Sheet	48 (2" pieces)	\$72.99	\$72.99	\$49.99
<input type="checkbox"/> Full Sheet	96 (2" pieces)	\$129.99	\$129.99	\$89.99
<input type="checkbox"/> 9" Pie	10 - 12	\$17.99	n/a	n/a
<input type="checkbox"/> Cup Cakes		n/a	\$5.50 per ½ doz. (eggless)	\$4.50 per ½ doz. (regular)

### Ice Cream & Cake Flavors and Topping / Mixing

Ice Cream Flavor (additional flavors \$3.00 each)	Cake Flavor (additional flavors \$3.00 each)	Topping / Mixing / Fruit (\$5.00 - \$25.00 Extra)	Frosting
<input type="checkbox"/> Layered <input type="checkbox"/> Side-by-side	<input type="checkbox"/> Layered <input type="checkbox"/> Side-by-side		(Select one)
	<input type="checkbox"/> Vanilla		<input type="checkbox"/> White Whip Cream
	<input type="checkbox"/> Chocolate		<input type="checkbox"/> No Whip Cream
	<input type="checkbox"/> Strawberry		<input type="checkbox"/> Other (specify)
	<input type="checkbox"/> Pineapple		
	<input type="checkbox"/> Red Velvet		
	<input type="checkbox"/> Lemon		
	<input type="checkbox"/> Other		

### Decoration

From Book (\$10.00 - \$25.00 Extra)	Border Color	KopyKake Image (\$10.00 Extra)	Buttercreme Roses (\$0.75 each) Gum paste Flowers (\$5.00 - \$10.00 extra)	Other

Pick up Date/Day: \_\_\_\_\_

Pickup Time: \_\_\_\_:\_\_\_\_ AM/PM

Comments / Message on Cake (max five words):

Cake: \$ _____	Extras: \$ _____	Decoration: \$ _____	TOTAL Price: \$ _____
Deposit: \$ _____		Balance: \$ _____	
Payment Method:    Cash                      Check # _____                      Credit Card			

Order taken by: Name: \_\_\_\_\_ Signature / Initials: \_\_\_\_\_