



ENOA Diner's Choice

Order Form

Please Print

Name: _____

Address: _____

City: _____ Zip: _____ Phone Number: _____

Number of Meals: _____

Completed order forms should be returned with contribution to:

ENOA Diner's Choice Program

4780 South 131st St., Omaha, NE 68137

Checks should be made payable to **"ENOA Diner's Choice Program"**

The suggested contribution for ENOA Diner's Choice is \$5.00 per meal.

Meal order must not exceed 20 meals.

Number of Meals	Suggested Contribution
2 Meals	\$10.00
5 Meals	\$25.00
10 Meals	\$50.00
15 Meals	\$75.00
20 Meals	\$100.00

If you have any questions, please contact us at 402-444-6513.

You will receive a meal card for each meal ordered. They will not be replaced if lost. There will be no refunds issued for meals not used.

Your meal card can be used at

Hy-Vee Supermarkets located in

Omaha, NE,

Papillion, NE,

Fremont, NE

and

Plattsmouth, NE

Credit Card contribution payment

Date: _____

Client Name: _____

Phone number: _____

Service: _____

Amount: _____

Credit card
type: _____

Credit card #: _____

Expiration
date: _____

Security code: _____

ENOA takes VISA, Mastercard, and Discover