



Frost Gelato
Bucket Order Form

FROST
A Gelato Shoppe

Order Taken By: _____

Name: _____

Bucket Date: _____ Phone Number: _____

Credit Card: VISA or MASTER CARD _____

Exp. Date: _____

One Bucket Serves Approximately 30 people
Must have at least 24 hours notice!

Number of Cups and Spoons: _____

Flavors:

1. _____	6. _____
2. _____	7. _____
3. _____	8. _____
4. _____	9. _____
5. _____	10. _____

Time of Pick-up (after 11:30am): _____