

# JUBILEE CHRISTIAN ACADEMY ORDER FORM

**Powered by: Senco Link Technologies, Inc.**  
Tel: 8893-4100 to 03  
Fax: 8817-6719

## PERSONAL INFORMATION

Parent/Guardian Complete name:

Student Name:

Grade Level:

Contact Number:  E-Mail Address:

Complete Address:

For Grade 4,5,6,7,8,9,10,11 & 12 required model:

I would like to order the following item(s):	CASH/CHECK	CARD/SRP	color
<input type="checkbox"/> iPad 8th Gen, 10.2" (2020) wifi: 32GB	<input type="checkbox"/> 17,600	<input type="checkbox"/> 18,990	<input type="checkbox"/> silver
<input type="checkbox"/> iPad 8th Gen, 10.2" (2020) wifi: 128GB	<input type="checkbox"/> 23,000	<input type="checkbox"/> 24,990	<input type="checkbox"/> gold
<input type="checkbox"/> iPad Mini 5 (2019) wifi: 64GB	<input type="checkbox"/> 20,900	<input type="checkbox"/> 23,990	<input type="checkbox"/> space gray
<input type="checkbox"/> iPad Mini 5 (2019) wifi: 256GB	<input type="checkbox"/> 29,500	<input type="checkbox"/> 33,490	
<input type="checkbox"/> iPad Air 4 10.9" (2020) wifi: 64GB	<input type="checkbox"/> 31,300	<input type="checkbox"/> 33,990	<input type="checkbox"/> space gray <input type="checkbox"/> silver
<input type="checkbox"/> iPad Air 4 10.9" (2020) wifi: 256GB	<input type="checkbox"/> 39,900	<input type="checkbox"/> 42,990	<input type="checkbox"/> Rose gold <input type="checkbox"/> green
			<input type="checkbox"/> sky blue
<input type="checkbox"/> iPad Pro 11" (2020) wifi: 128GB	<input type="checkbox"/> 41,500	<input type="checkbox"/> 47,990	<input type="checkbox"/> space gray
<input type="checkbox"/> iPad Pro 11" (2020) wifi: 256GB	<input type="checkbox"/> 47,000	<input type="checkbox"/> 53,990	
<input type="checkbox"/> iPad Pro 11" (2020) wifi: 512GB	<input type="checkbox"/> 58,000	<input type="checkbox"/> 65,990	<input type="checkbox"/> silver

## Mode of Payment:

CASH

CHECK

ONLINE BANK TRANSFER

CARD

ACCOUNT NAME: SENCO LINK TECHNOLOGIES, INC.  
BPI ACCOUNT: 0071-1011-18  
BDO ACCOUNT: 0071-0800-5943  
UBP ACCOUNT: 0021-0101-2851

\*\*\* 0% INTEREST for 6 months to pay (HSBC and BPI card holder Only)



## CLAIM STUB

Parent/Guardian Complete name: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Complete Address: \_\_\_\_\_

Ordered Unit: \_\_\_\_\_ Price: \_\_\_\_\_

Received by:

\_\_\_\_\_  
Signature Over Printed Name/Date

**To follow-up order: (Call or Text)**



**0917 - 5418897**

or

email: jabbarbaroga@sencolink.com