



ORDER FORM

ORDERED BY:
 Name _____
 Address _____
 City/State/Zip _____
 Phone _____
 Email _____

DELIVER TO:
 Name _____
 Address _____
 City/State/Zip _____
 ☺ Please enclose gift note: _____

ITEM DESCRIPTION	QUANTITY	PRICE/EACH	SUBTOTAL

SHIPPING CHARGES (UPS Ground)	
\$00.01 - \$25.00	\$ 8.00
\$25.01 - \$50.00	\$ 9.00
\$50.01 - \$99.99	\$10.00
\$100+	\$12.00

Subtotal _____
 Shipping _____
TOTAL \$ _____

☺ Check Enclosed
 ☺ VISA/Mastercard

Credit Card # _____ Exp. Date _____
 Cardholder Signature _____
 Billing Address _____
 Code on back of card _____