



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 _____