ORDER FORM

Ship To:

Please Print

Name

Address

City/State/ZIP

Phone Number ( ) Email:

Bill To:

Name

Address

City/State/ZIP

Phone Number ( ) Email:

LIST MERCHANDISE (PLEASE PRINT CLEARLY)

Item #	Qty.	Description	Color/Size	Price	Total Amt.

Do you know someone who would like our catalog?

Name

Address

City/State/ZIP

Merchandise Total	
Sales Tax (if applicable)	
Packing & Shipping	
Total Amount	

Packing & Shipping Chart

These charges represent only a part of the actual costs. We'll pay the rest. If your order is:

Up to $30.00	$10.45
From $30.01 to $39.99	$10.95
From $40 to $54.99	$11.45
From $55 to $74.99	$13.45
From $75 to $99.99	$14.95
From $100.00 to $199.99	$17.95
$200.00 and over	Call for details

Freight charges apply within the continental United States.
Orders outside the continental United States may incur additional charges.

Enclosed is the full amount of my order $_____

Paid by: (Check one please)

❑ Personal Check ❑ Money Order ❑ Certified Check

(Checks Payable To Addressee On Top of Order Form)

CHARGE this order to my: ❑ Mastercard ❑ Visa ❑ American Express ❑ Discover

Charge card number _____

Card expiration date ____/____/____ (MO DA YR) Signature_____ (required)