

GARMENT ORDER FORM

ORDER NO. _____
 CUSTOMER NO. _____
 P.O. NO. _____
 EVENT DATE _____

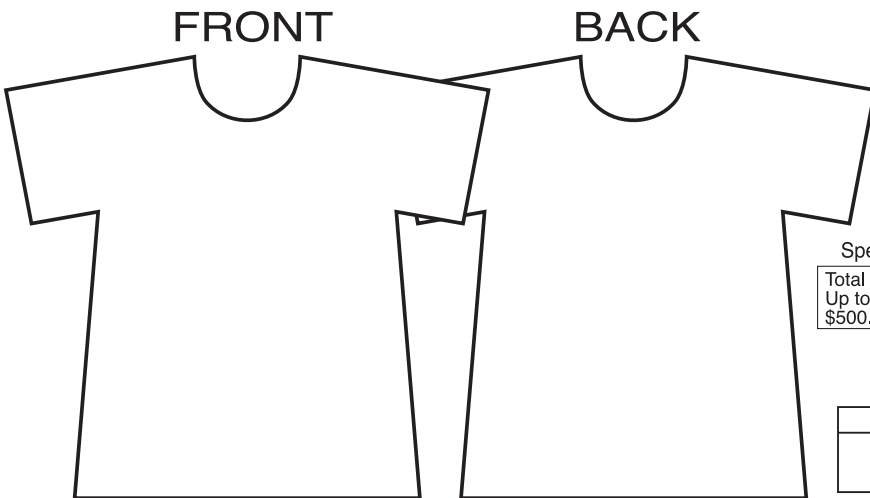
BILL TO:

Club Name _____
 Name _____
 Address _____
 City _____ State _____ Zip _____
 County (Wisconsin only) _____
 Daytime Telephone _____ Fax # _____
 E-mail address _____

PLEASE CHECK ONE	
<input type="checkbox"/>	2 Week Delivery From Receipt Of Order (Speed Service Charge) DATE REQUIRED _____
<input type="checkbox"/>	3 Week Delivery From Receipt of Order DATE REQUIRED _____

SHIP TO: _____

Shirt Style	Color	Adult						Youth			Quantity	Price per piece	Total
		S	M	L	XL	XXL	XXXL	6-8	10-12	14-16			
TOTAL Garments													



Imprint Color(s)

Imprint Color(s)

Speed Service Fee
 Total Order Value
 Up to \$500.00 - \$30.00
 \$500.01 & Up - \$60.00

Artwork		
Proof of Artwork		
Special Color Mix		
Speed Service Fee		
Est. Shipping		
Youth Setup Charge		
Sub Total		
WI Sales Tax		
Total		
50% Deposit		
BALANCE		

Shipping & Handling Fee will apply

FOR OFFICE USE ONLY	
<input type="checkbox"/> UPS	<input type="checkbox"/> UPS 2nd Day
<input type="checkbox"/> Pick Up	<input type="checkbox"/> Other _____

- Full Amount
- 50% Downpayment
- On Hold



(Charge card information)

Card # _____
 Name _____
 Exp. Date _____

OFFICE USE ONLY
Supplier: _____ _____ _____ _____