

NameBadge Order Form

Fax To: (604) 271-3347

ORDERED BY: (PLEASE PRINT)

Name: _____
 Organization: _____
 Dept: _____
 Address: _____

 City: _____
 State: _____ Zip Code: _____
 Tel: (____) _____ Fax: (____) _____
 e-mail: _____

SHIP TO: (if different)

Name: _____
 Organization: _____
 Dept: _____
 Address: _____

 City: _____
 State: _____ Zip Code: _____
 Tel: (____) _____ Fax: (____) _____

METHOD OF PAYMENT:

Check Enclosed Visa MasterCard Amex

CC # _____

Expiry Date ____/____/____ Card Security Code: _____

Name on Card: _____

Signature: _____

** Prices listed are in US\$ and subject to change without notice.*

Bill Us (Payable on receipt)

(Call for credit application first.)

Purchase Order #: _____

Signature: _____

ITEMS ORDERED:

Item #	Quantity	Description (Color)	Unit Price	Total

SPECIAL INSTRUCTIONS:

SHIPPING/HANDLING & INSURANCE:

- Regular Ground Shipping**
 - Supplies Total (under \$150) **\$10.00**
 - Supplies Total (\$150- \$350) **\$15.00**
 - Supplies Total (Over \$350) **FREE**
- Expedited 3-Day Shipping**
 - Supplies Total (under \$150) **\$20.00**
 - Supplies Total (\$150- \$300) **\$30.00**
 - Supplies Total (\$301 - \$500) **\$40.00**
 - Supplies Total (\$501 - \$750) **\$50.00**
- Next Day/2-Day** **call**

Additional charges will apply to Alaska, Hawaii and International Orders.
 (Additional shipping charges will apply for BadgeTotes.)
 Call for shipping charges on orders over \$750.

Supplies Total	
Shipping/Handling	
Total	

Date Required:

*Thank you, we appreciate your business.
 You will receive an email confirmation of this order.*