

Apparel Order Form

Please Fax or Mail this Form

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Payment Type: Master Card Visa Card Number: CVV#: Expiration Date: Authorized User: Card Statement Address: City/State/Zip: User Phone #: PO# (if not prepaying): Show Title:				Ship To: Organization: Address: City/State/Zip: Attn: Email Address: Phone #: Fax #: Show Date:					
Please enter	Youth M	Youth L	Adult S	Adult M	Adult L	Adult XL	Adult 2XL	Adult 3XL	1
Quantities									
Unit Price									
			See p	oricing infor	mation bel	low			
Shirt Color:									
Shirt Type (t-shirt, crew, etc.): Front Ink Colors: Back Ink Colors:						charges will be added to			
Please illustrate Include the loca	how you vation of yo	vould like ur text (if	your shirt any) and	ts to look. the logo.		Please co	omplete th are to be o	e followin customize	g if
						caz in an Adob	must also be ezzcoorders@gn e Illustrator of t print-ready, a	emailed to nail.com r Photoshop f	file.

There is a 20 shirt minimum on all orders

XXL: add \$2.50 per shirt (call for larger size prices and availability)

Additional forms can be found at www.scenographics.com/apparel