



PLEASE NOTE: All matching pieces of an outfit or garment should be processed at the same time in order to avoid color variations between pieces. Items processed separately are at customer's own risk.

Contact/Shipping Info

REQUIRED: In order to process your order, we must have all of the following information. Please write or print legibly and make a copy of this form for your records. You must include this form when shipping your items to us.

Name _____

Home Phone _____ Office _____ Cell _____

Email Address _____

Ship to Information:

Address _____

City/State/Zip _____

_____ **Please contact me before proceeding.**

Credit Card Information:

For your convenience we accept:
VISA MASTERCARD DISCOVER
Name as it appears on your card:

Account # _____

Exp. Date _____

Authorized Signature: (required)

Insurance:

Declared value of your shipment
\$ _____ (required).

Return shipments are insured for \$300. For additional insurance check below:

_____ \$400 total insurance (add \$2)

_____ \$500 total insurance (add \$4)

_____ \$600 total insurance (add \$6)

IMPORTANT: You must complete page 2 of this form to indicate your requested services.

