

Advanced Play

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Order Form

Delivery to:

Name _____

Address _____

Phone _____

	Product Name	Unit Price	Quantity	Total
1				
2				
3				
4				
5				
6				
7				
8				
Subtotal				
			Sale Tax 7%	_____
			Shipping & Handling	_____
			Total	_____

Thank you for your business!	Method of Payment
	Check/money order _____
	Credit Card:
	Visa _____ Master _____ Discover _____
	Card # _____
	Expiration Date _____
	Name on Card _____
	Signature _____
Credit Card Billing Address (if different from delivery address)	

