



FINISHING TOUCHES Order Form

Date of order _____

ORDERING

Phone order to: 800-926-8351
or fax order to: 603-929-9773
or mail order to: Tracy Theatre Originals
70 High St
Hampton, NH 03842

Ordered by: _____

Organization(if applicable) _____

Daytime or cell phone number _____

E mail address _____

Please add these services:

- Sat delivery - \$15 not available with ground
delivery to a residence - \$8
early AM delivery \$10 only with next day
international - \$40 with 2 day rate

SHIPPING

Ship order to: _____

This is a: ___residence ___business

Please ship my order:

- ___ground
___third day
___second day
___next day

See rate chart for shipping estimates

RATE CHART

Table with shipping charges for different order totals and delivery methods.

PAYING

If you pay by personal check, we will ship your order when your check clears

If you want to use an organizational check or school purchase order, please speak with us

If you plan to pay with a credit card, please call to tell us that number

quantity item - size description - color price amount

Table with 5 columns: quantity, item - size, description - color, price, amount. Multiple rows for item entry.

office use only

date scheduled date done

ship _____

pickup _____

name on card _____

card # _____

expiration date _____

V code _____

credit card bill is sent to:

card street # _____

cc zip _____

NOTES:

purchase total _____

shipping _____

total due _____