Holiday Cards Order Form

	CLIENT INFORMATION				
	Last Name			First	
	Shipping Address			Apartment/U nit #	
	City		State		ZIP
	Phone			E-mail Address	
Form of payment:		☐ Paypal ☐ Check ☐ Credit Card ☐ Cash			
Card Type Choice:		\square 5x7 one sided \square 5x7 two sided \square 5x7 ornament cut out card			
Sh	ipping choice:	\square Ship to th	ne address above	\square I would like to pic	k up my order (Palatine)
M	y order:				
Q	uantity of Cards:				
D	esign Type:				
(describe design)					
Color Changes:					
Te	ext Changes:				
	ext for Closing: (ex. ne Millers)				
ec pr	lit will be included i	n the order. Afte should take 1-2	er that point, if you v weeks to receive in t	vant any changes, it is	their order. One custom \$10 for each change of week with pick up. You
th					nade in full. I understand n about 1-2 weeks after
	☐ Agree ☐ Di	sagree			
Się	gn:		D	ate:	archynhatog com
	t Daachy Dhatagraphy	1100 F Foolsot Drive	Deletine II C0074 / 04	7 202 1702 / www.iustne	a shunhata a sam