

DVD ORDER FORM



PLEASE CHECK ONE

PLEASE GIVE MY ORDER TO MY SON/DAUGHTER AT SCHOOL:

SON/DAUGHTER NAME:- _____ GRADE _____

CHOIR _____

PLEASE SHIP MY ORDER TO THE ADDRESS BELOW:
(PLEASE NOTE THERE IS A \$3 DOLLAR SHIPPING CHARGE PER ITEM)

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE NUMBER _____

HOW MANY DVD'S DO YOU WANT?

_____ X \$ 20 = _____
QUANTITY PRICE PER DVD TOTAL

SEND ORDER FORM TO:

KAREN MOTIL
2770 ELGINFIELD RD
COLUMBUS, OH 43220

DVD TOTAL = _____
SHIPPING (\$ 3 PER DVD) TOTAL = _____
TOTAL = _____

PLEASE MAKE ALL CHECKS PAYABLE TO: **UAVM BOOSTERS**